

5200 36<sup>th</sup> Street S.E Grand Rapids, MI 49512 Ph: 800.748.0363 Fx: 800.968.8822

## **Bishop Distributing Order Form**

<b>Customer Name</b>			Bishop Acc	ount #			
Contact Name			Phone #				
PO #	S	Side Mark					
Bill To Address:							
City		State		Zip			
Ship To Address:							
City		State		Zip			
Date Required							
Special Instructions:							

Item Number	Description	Quantity	Unit Measure	Price

## **TERMS OF SALE**

- I have reviewed the order and agree to accept shipment of all products as listed within 30 days.
- I understand my account must be current to participate in any Bishop Distributing promotion.
- I understand that if this purchase is based on a promotion I cannot combine it with any other promotion or pricing schedules.
- I understand that non-running line product cannot be returned.
- I agree to the payment terms of net 30 days or CBD (contingent upon terms of my account).
- I agree to pay service charges for any payments made later than 30 days past the invoice date.
- I agree to pay the freight associated with the shipping of this product unless other arrangements have been made (pick up from the Grand Rapids warehouse).

Signature	Date	