



www.plainjans.com

They just come in
HANDY

Date order placed _____

Place Order Fax 620-872-3822
BY Phone: 800-235-6140
Email: info@plainjans.com

Order taken by _____

Circle how order Taken by: phone email tradeshow fax

IMPRINT INFO	SHIP TO INFORMATION
	Name: _____ Company: _____ Shipping Address _____ <small>(physical address is required for delivery)</small> Billing Address: _____ City, State, Zip: _____ Phone: _____ Text #: _____ E-mail _____ Date Order needed: _____ No Specific date _____ Must have date _____

ORDER INFO:

# of Cases	Glove Color	Unit Price	TOTAL	\$
	Gray White Black Charcoal			
	Super Cool Grip			

Art approved by: _____

Circle: reorder new

Glove Sample Needed: YES NO

_____	L	Gray
_____	M	Gloves
Ink Color: _____		

_____	L	Charcoal
_____	M	Gloves
Ink Color: _____		

_____	L	White
_____	M	Gloves
Ink Color: _____		

_____	L	Super
_____	M	Gloves
Ink Color: _____		

_____	L	Black
_____	M	Gloves
Ink Color: _____		

_____	L	Cool
_____	M	Grip
Ink Color: _____		

Set-Up: 1-Color _____
 2-Color _____
 Other Fees..... _____
 ADS _____

Shipping _____
 SUBTOTAL: _____

KS Residents only TAX _____

TOTAL: _____

Additional information:

MasterCard VISA Discover Am Express

Card Number: _____

Exp Date: _____

CWV: _____

We need CVV # (3 or 4 digit #),

Card Holder Name: _____