



CUSTOMER SPECIAL REQUEST

Customer: Please fill out the box below and return it to the store or fax it to 425.333-4372..

Customer Name: _____	Phone: _____
Date Ordered: _____	Date to Pick Up: _____
Item you would like us to special order: _____ _____	
Item you would like us to carry as an everyday product: _____ _____	

Request Received By: _____

Request Submitted To: _____

Date Product Ordere: _____

Date Product Received: _____

Location of Product for Customer Pick-Up: _____

Date Customer was called for pickup:

First Call: _____ Second Call: _____

Third Call: _____ Date product picked up: _____

Special Ad Pricing and/or discount customer is to receive:
