

GLEIBERMAN'S ORDER FAX COVER SHEET

FACSIMILE TRANSMITTAL SHEET

TO: **Orders** FROM: _____

COMPANY: **Gleiberman's** DATE: _____

FAX NUMBER: **704-532-9111** TOTAL NO. OF PAGES INCLUDING COVER: _____

PHONE NUMBER: **704-563-8288**

RE: **Order Form(s)**

URGENT FOR REVIEW PLEASE COMMENT PLEASE REPLY PLEASE RECYCLE

NOTES/COMMENTS:

Customer Name: _____

Address: Street: _____

Apartment or Suite #: _____

City: _____ State: _____ Zip: _____

Phone: (H) (_____) _____ (C) (_____) _____

(Work) (_____) _____

If your shipping address is different than the above address, please enter it below:

Address: Street: _____

Apartment or Suite #: _____

City: _____ State: _____ Zip: _____
