

ALASHAN CASHMERE COMPANY

411 CHAPEL STREET

HARRISVILLE, RI 02830 USA

Tel: 401-710-9653 www.ALASHANCASHMERE.COM Fax: 401-710-9654

Order toll free: 1-877-369-2581

Date: _____	Show: _____
Bill To Address: _____	Ship To Address: _____
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Tel: _____ Fax: _____	Email: _____

Purchase Order No.	Dept. No.	Ship Via:	Start Ship:	In Store Cancel:	Sales Rep:	Terms:
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QUANTITY

STYLE #	COLOR	DESCRIPTION	XS	S	M	L	XL	XXL	Total Quantity	Price	Total

Forms Following:	M1: <input type="checkbox"/>	M2: <input type="checkbox"/>	M3: <input type="checkbox"/>	M4: <input type="checkbox"/>	M5: <input type="checkbox"/>	M6: <input type="checkbox"/>	M7: <input type="checkbox"/>		
	W1: <input type="checkbox"/>	W2: <input type="checkbox"/>	W3: <input type="checkbox"/>	W4: <input type="checkbox"/>	W5: <input type="checkbox"/>	W6: <input type="checkbox"/>	W7: <input type="checkbox"/>	W8: <input type="checkbox"/>	W9: <input type="checkbox"/>
	A1: <input type="checkbox"/>	A2: <input type="checkbox"/>	A3: <input type="checkbox"/>	A4: <input type="checkbox"/>	A5: <input type="checkbox"/>	A6: <input type="checkbox"/>	A7: <input type="checkbox"/>	A8: <input type="checkbox"/>	A9: <input type="checkbox"/>
	A10: <input type="checkbox"/>	A11: <input type="checkbox"/>	A12: <input type="checkbox"/>						

FOB Rhode Island warehouse. UPS Ground and insurance used unless other method specified above.
Order can not be canceled after ten (10) days from vendor receipt. Order subject to credit approval.
Any off-price sales are final. Merchandise will not be accepted for RETURN without prior authorization.

Buyer's Name: _____ Buyer's Signature: _____
(Print)
Special Instructions: _____