




CLF Inc.				Mail / Fax To:			
				976 Mockingbird Ave. Henry, TN 38231 Fax: (731)243-3176			
Phone Number		Contact Name		E-mail Address			
Bill To:				Ship To: (fill in only if different from bill to)			
Name				Name			
Billing Street Address				Street Address			
City		State	Zip Code	City		State	Zip Code
QUANTITY	ITEM #	DESCRIPTION		COLOR	SIZE	PRICE	AMOUNT
Please attach separate page if needed							
				Sub Total		\$	
				Shipping (see FAQ for rate)			
				Discount (if applicable)		\$	
				Sales Tax (TN residents only)		\$	
				TOTAL		\$	

Payment Method (Please check which method you will be using)

<input type="checkbox"/> Money Order / Cashier Check (enclosed)				
<input type="checkbox"/> Credit Card		Card Number	Expiration	CSV Code
<input type="checkbox"/> Visa				
<input type="checkbox"/> Master Card				
<input type="checkbox"/> Discover				
Name of Cardholder (as it appears on the card)				
Authorized Signature		Date		