PACKING SLIP

SOLD TO _____ SHIP TO _____

ADDRESS _____ _____

CITY _____ STATE _____ _____

SAME AS SOLD TO UNLESS OTHERWISE INDICATED HERE

DATE	YOUR ORDER NO.	OUR ORDER NO.	SHIPPED VIA	CTNS. PKGS.	TOT. WT.

QUANTITY ORDERED	QUANTITY BACK. ORD'D.	QUANTITY SHIPPED	DESCRIPTION

❑ ORDER COMPLETE

❑ BALANCE TO FOLLOW

PLEASE NOTIFY US IMMEDIATELY IF ERROR IS FOUND IN SHIPMENT.

PACKED BY _____ CHECKED BY _____

FORM #40B