



Van Dyke's • Jonas • Wasco

Date: _____

Name: _____

Shop Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Ship Via: ☐ Walk-In

☐ UPS☐ USPS (Mail)

☐ SPEE-DEE

☐ Truck☐ Fed-Ex

☐ Best Way

[illegible]

Amount of Order

Discount

State Sales Tax Where Applicable

Total Amount Paid

CREDIT or DEBIT CARD

Card No. _____

Exp. Date: _____ CVV code: _____

Signature: _____

CHECK by PHONE

Routing No. _____ Account No. _____