TOOL*life* Order Form

Deliver To:

Ekstrom Carlson
KOMET SERVICE® Partner
5248 27th Ave.
Rockford, IL 61109

Email *sales@ekstromcarlson.com*
Phone *(815) 394-1744*
Fax *(815) 316-8120*
Web ***ekstromcarlson.com***

Order Date _____

Shipping Information:

Company Name _____

Contact _____ Phone # _____

Street Address _____

City _____ State _____ Zip _____

Email _____

Customer # _____ **Order #** _____ **Supplier #** _____

Qty.	Order #	Description of Tool / Article	Customer Material #	Other Info.

Payment terms are Credit Card or Pre-Pay. Contact Ekstrom Carlson with questions.
The Terms & Conditions of KOMET USA apply to this order.