KEYSTONE poly FURNITURE

Order Form

Shipping			*Billing* ☐ *Check if same as shipping address*		
Company Name			Company Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone	Fax		Phone	Fax	

Item	*Color(s)*	*Price*	*Quantity*	*Total Price*

Product Subtotal	
Handlings	
Shipping	
GRAND TOTAL	

Method of Payment

☐ Check ☐ Money Order ☐ Credit Card

Make checks payable to: Poly Furniture USA

Credit Card # _____

Exp. Date _____

Signature _____

Email Your Orders to sales@keystonepoly.com