

ORDER FORM

Date _____

SHIP TO

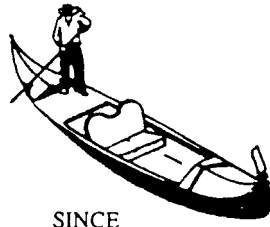
Name _____

Address _____

City/State/Zip _____

Telephone _____

Fax _____



SINCE
1976

PHILLIP HOLLAND, G.G.

ALEXANDER-LEE

P.O. Box 42102 Houston, TX 77242

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QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	TOTAL PRICE

PAYMENT METHOD:

VISA _____ MASTERCARD _____ Amer. Express _____
 COD _____ Discover _____
 CC# _____ Exp _____

SIGNATURE (required) _____

SHIPPING METHOD: Priority Post _____
 UPS 2nd day _____ UPS next day _____
 Express Mail _____ Parcel Post _____

POSTAGE & HANDLING	
SUBTOTAL	
GRAND TOTAL	