

DATE _____

CUSTOMER PO # _____

ACCOUNT # _____

Sold to/Bill to:

NAME _____

COMPANY NAME _____

ADDRESS _____

CITY/PROVINCE _____ POSTAL CODE _____

PHONE _____

EMAIL _____

Ship to: (if different from billing address)

NAME _____

COMPANY NAME _____

ADDRESS _____

CITY/PROVINCE _____ POSTAL CODE _____

PHONE _____

EMAIL _____

Submit to your local sales representative or textiles_orders@knoll.com.

Please allow up to 3-4 business days upon receipt of your order to receive an acknowledgement or ProForma.

Tel 866.565.5858 FAX 866.565.5860

Payment:

CREDIT CARD PAYMENT: VISA MASTERCARD AMEX

CARD HOLDER NAME _____

CREDIT CARD # _____

EXPIRATION _____ CURRENCY: US

SIGNATURE _____

NAME (PRINT) _____

TITLE _____

ADDRESS _____

The signature above indicates that this purchase is being made by an authorized principal of the Purchaser. Sales by KnollTextiles ("Seller") of KnollTextiles Products within the United States and Canada are made only on the terms which are contained in the KnollTextiles Selling Policy (www.knoll.com). Seller hereby gives notice of its objection to any different or additional terms and conditions.

SALES REP NAME _____

SPECIAL INSTRUCTIONS _____

CFA SHIPPING ADDRESS (IF DIFFERENT FROM SOLD/SHIP TO ADDRESS) _____

QUANTITY	PATTERN NUMBER	PATTERN NAME	COLORWAY	PER YARD NET PRICE	TOTAL

SHIP VIA _____

FINAL DESTINATION _____

MARK FOR _____

SPECIFIER/CITY _____ END USER/JOB NAME _____

TAX EXEMPT: YES (ATTACH CERTIFICATE) NO STATES EXEMPT IN _____

TOTAL NET PRICE (US)	
SHIPPING & HANDLING	
TAX	
ORDER TOTAL (US)	