

Color Order Form



BC Long

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ORDER INFORMATION

ORDER NO.#

ORDER DATE

PROMISE DATE

CUSTOMER INFORMATION

NAME

ADDRESS

EMAIL/PHONE

Storm Pro



PAYMENT METHOD



Cash



Credit Card



Others

DELIVERY METHOD



Pick Up



Drop Off

Shipping Date:

Shipping Tracking#

| | |
|-----------|----------------------|
| SUBTOTAL | <input type="text"/> |
| DISCOUNTS | <input type="text"/> |
| TAXES | <input type="text"/> |
| TOTAL | <input type="text"/> |

NOTES