

Black Cat LLC (Puma) Aug 18 2014 3-part Job Work Order forms
 1jn7822 8-18-2014 Job Work Order forms c124.60+1417f s16537+1500f Del I=70837115 8-27-2014

8543

FOR USE BY CHRISTIE PRINTING	
Complete:	7-12-2018
Billed:	6-28-2018
Entered:	6-28-2018
Delivered:	6-28-2018 #579057
Received:	6-28-2018



Christie Printing Service
 P.O. Box 3057 | Cheyenne, WY 82003-3057

Phone: 630.464.9391 | email : CPrint@ChristiePrinting.com

Purchase Order No. 8543

TO: Delforms 3660 Victoria Street N. Shoreview, MN 55126		INVOICE TO: Christie Printing Services 5711 Osage Ave., Suite C Cheyenne, WY 82009		SHIP TO: Christie Printing Services 5711 Osage Ave., Suite C Cheyenne, WY 82009	
ORDER DATE 6-18-2018	DATE REQUIRED	SHIP VIA Deliver to Christie Printing @ ship to address shown above.		F.O.B.	
Terms	QUOTE 6-13-2018 email approved			For Resale Yes	For Use
QUANTITY		PLEASE SUPPLY ITEMS LISTED BELOW		UNIT	PRICE
ORDERED	UNIT				
500 (exactly)	Each	Provide a proof for approval prior to printing. Reviewed 6-20-2018 3-part Job Work Order • White, Canary and tag • Black blue ink (Delforms bait-n-switch. Quoted black ink and then switched right before printing. Threatened higher price for black ink.) • Number starting at 2,001 • 5 2/3" x 8 1/2" • Two 3/16 holes at bottom 2-3/4 c. to c. • Snap stub at top Except for the quantity, this is an exact reorder of Delform's previous Invoice number 70837115 dated 8-27-2014 and Christie Printing's previous PO number 7822 dated 8-18-2014.			
IMPORTANT Our Purchase Order Number MUST appear on invoices from you to us, packages & correspondence. Acknowledge if unable to deliver by date required				BY: Cynthia L. Duke	

COST	
\$137.20	
\$ 18.00 freight	
\$155.20	
I= 00074617028	Date: 6-27-2018
Paid ck #: 5898	Date: 7-23-2018
Notes for Cynthia: Reorder Inquiry 3/1/2022	

PRICE	
On Invoice show Black Cat's PO#: June 2018 Job Work Order	
Deliver to Puma in Cheyenne	
\$171.50	
\$ 18.00 freight	
\$189.50	
\$ 10.29 ST 6%	
\$199.79	
Paid ck #: 7415	Date: 7-10-2018

E



DATE OF ORDER

CUSTOMER'S ORDER NO.	PHONE	MECHANIC	HELPER	STARTING DATE // //
BILL TO				ORDER TAKEN BY
ADDRESS				<input type="checkbox"/> DAY WORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA
CITY				
JOB NAME AND LOCATION				
			JOB PHONE	

DESCRIPTION OF WORK:

		TOTAL MATERIALS		
		TOTAL LABOR		
		TAX		
DATE COMPLETED / /	WORK ORDERED BY	TOTAL AMOUNT	\$	

Signature _____

☐ No one home

☐ Total amount due
for above work: or

☐ Total billing to be mailed after completion of work

I hereby acknowledge the satisfactory completion
of the above described work.



JOB COST RECORD

[illegible]