



# DI-PRO LLC

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## CUSTOMER ORDER FORM

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Customer # (Sold To): \_\_\_\_\_  
**Bill To #:** \_\_\_\_\_  
Customer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
PO# \_\_\_\_\_

**Ship To #:** \_\_\_\_\_  
Customer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Authorized By: \_\_\_\_\_  
Telephone #: \_\_\_\_\_

Part No.	Description	Quantity

**Special Instructions:**