



NEW ITEM/SPECIAL ORDER FORM

TODAY'S DATE			
CUSTOMER NAME			
CUSTOMER PHONE			
CUSTOMER E-MAIL			
PREFERRED CONTACT METHOD	<input type="checkbox"/> PHONE <input type="checkbox"/> EMAIL		
ITEM REQUESTED			
REQUEST TYPE	<input type="checkbox"/> SPECIAL ORDER <input type="checkbox"/> NEW ITEM (have not seen item on shelves) <input type="checkbox"/> BRING BACK ITEM (used to have item on shelf, but no longer do)		
ITEM DESCRIPTION			
BRAND		SIZE (Unit of Measure)	
IF SPECIAL ORDER COMPLETE THE FOLLOWING			
DATE PRODUCT NEEDED		AMOUNT OF PRODUCT NEEDED	

*Please allow 48-hours for follow-up notification.

**Special Orders require 4-weeks notice. Late requests cannot be guaranteed.