



Pricing & Availability Form Page 1 of 1

<u>COMPANY</u>	
Your Name:	_____
Company:	_____
Customer #:	_____ If you have your customer # you may leave the rest of this block blank
Address:	_____

City:	_____ State: _____
Zip:	_____
Phone: (_____) _____	
FAX: (_____) _____	
E-Mail: _____	
Web: _____	

QTY	PRODUCT#	DESCRIPTION	FINISH	NOTES

ADDITIONAL NOTES ETC.

NOTES

**Please Fax or E-Mail this completed form to. FAX (434) 237-5560
or E-Mail: Info@DavidMichaelFurniture.com**