

TRI CITY FLASHING ORDER SHEET

Customer Name: _____ **Date Ordered:** _____

Contact Name / Phone #: _____

Job Name / PO#: _____ **Approved by:** _____

Color:	Gauge:	Color:	Gauge:
A)		B)	
Quantity:	Girth:	Quantity:	Girth:

Color:	Gauge:	Color:	Gauge:
C)		D)	
Quantity:	Girth:	Quantity:	Girth:

Date Completed: _____