



SPECIAL PHONE ORDER REQUEST

Store Location ID: _____

Reps Name: _____

Deposit Date	
Customer Name	
Customer ID#	
Customer Phone #	

DEVICE MODEL REQUEST	COLOR	GB	QTY

Deposit \$50 The deposit is non-refundable unless seven (7) days pass between deposit and call back date.

Check Customers ID# before the SALE or RETURNING the Phone DEPOSIT

Customer pickup (date/time): _____ SALES INVOICE #: _____

CUT THIS LINE

CUSTOMER COPY OF THE DEPOSIT

Customer **MUST** bring this copy to receive their deposit back

Customer Name: _____ Deposit Date: _____

Reps Name: _____ DepositAmount: _____