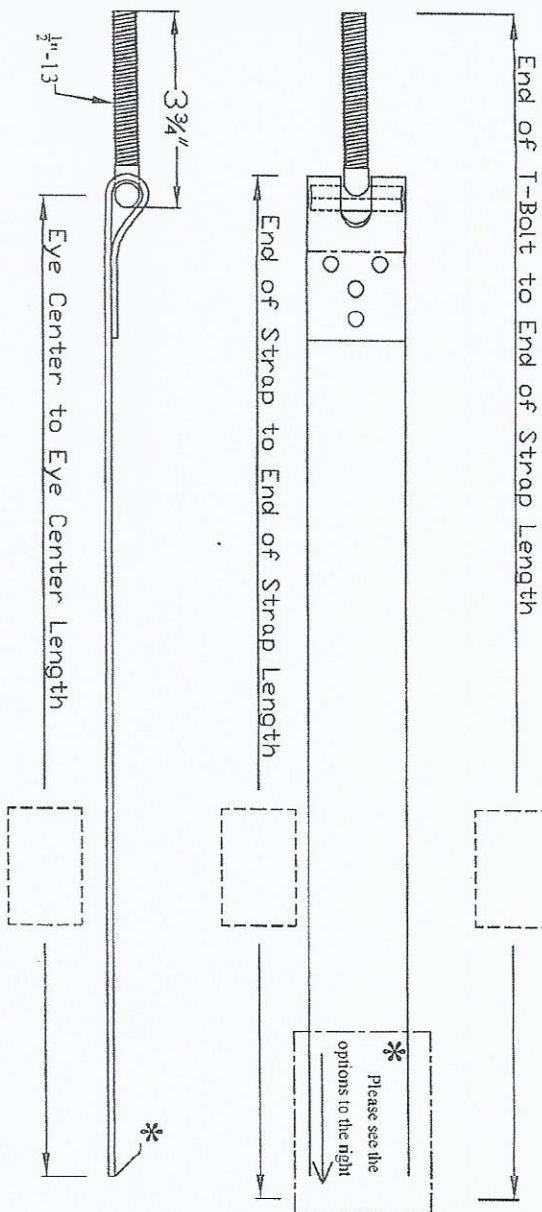


# Strap Order Form



**Customer Info:**  
 Date: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City / State / Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_

**Office Use**      **Ship date:** \_\_\_\_\_

Strap Qty: \_\_\_\_\_ Black Steel | Stainless Steel

Rubber | No Rubber

Strap: \_\_\_\_\_ Inches  Bracket: \_\_\_\_\_ Inches

Bring to:  Office  Shop

Box Qty:  1 Kit/Box  As few boxes as possible

PKG Initials \_\_\_\_\_ Date \_\_\_\_\_

Please Check the box that matches the strap end style that you have.

