Sold To: Please Verify All Information
Name & Customer Number
Address
Address
City/State/Zip
Day Telephone
E-mail

Ship To: Leave Blank if Same as Above
Name
Address
City/State/Zip
My E-mail Address
Day Telephone

Mail To: SuperTruck Essentials™ · Dept J · 1028 Saunders Lane · West Chester, PA 19380 or Fax to 610-701-2402

My Truck has (Circle all that apply): **Short Bed** **Long Bed** **Automatic** **Manual** **6cyl** **4cyl** **8cyl**

Please review pre-printed Name & Address information for accuracy. Print any corrections in lower box.
This form can be used to submit an order through the Mail or by 24-Hour fax. Please Copy this form as needed.

Qty.	Item Number	Color	Description	Price

Sub Total of Order	A
Click Here to See Shipping Chart	B
If COD add $16.00/Box	C
PA Residents add 6% Sales Tax **NV Residents add 7.25% Sales Tax**	PA NV Only
Total Payment	

Your Method of Payment
❍ Visa ❍ MasterCard ❍ Discover ❍ American Exp.
❍ Certified Check or Money Order ❍ Personal Check
Credit Card # Expires

Please Tell Us About Your Vehicle	
Yr.	Model

Thank You!