GECKO DEPOT

FAX ORDER FORM

Company Name: _____ Date: _____

Address: _____

Phone #: _____ Fax #: _____ Email: _____

Purchase Order Number: _____ Person Placing This Order: _____

Type of shipping service: ☐ Next Day ☐ Two-Three Day ☐ Ground

Credit Card Number: _____ ☐ Visa ☐ Mc Expiration Date: __ / 20__

Qty	Product Code	Description	Price	Total

Fax Order Confirmation

Date: _____

Sales Order Number: _____

Ship Date: _____

Sales Person: _____

Thank you!
Please Fax To:
866.759.0906

GECKO

Service Department:
450 des Canetons
Quebec (QC)
G2E 5W6 Canada
800.784.3256 ext.350
Fax: 866.759.0906