



United Associates Ltd.
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HOURS:
 Monday-Friday
 8:00 am-5:00 pm EST

[877] 792 7900
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 www.unitedjoinforces.com

ORDER FORM

NAME* _____

COMPANY (optional) _____

BILLING ADDRESS* _____

CITY* _____ STATE* _____ ZIP* _____

PHONE* _____

EMAIL* _____

SHIPPING ADDRESS SAME AS BILLING ADDRESS*

SHIPPING ADDRESS _____

CITY _____ STATE _____ ZIP _____

ATTN _____

PHONE _____

*required

ITEM NUMBER	DESCRIPTION	COLOR	SIZE	QTY	PRICE	TOTAL

PAYMENT INFORMATION

VISA MasterCard

Card #: _____

Card Expiration Date (month/year) _____ / _____

Security code (3 digits on back) _____

Cardholder name (print) _____

Signature _____

SUB-TOTAL	
SALES TAX	
CALL for SHIPPING	
TOTAL	

Thank you for your order!