

CUSTOMER NAME	SHIP TO
CUSTOMER ACCOUNT NUMBER	
PO NUMBER	
CONTACT NAME	
PHONE NUMBER	
DATE	

FOAM CONCENTRATE ORDER FORM Form # 2.3J Rev. 05/13/08

Part #	Foam Type	Qty	\$/Unit	Total \$	Part #	Foam Type	Qty	\$/Unit	Total \$
50325	1% AFFF Plat 5 g				50190	Class A 5 g			
50330	1% AFFF Plat 55 g				50195	Class A 55 g			
50335	1% AFFF Plat 275 g				50200	Class A 275 g			
50340	3% AFFF Plat 5 g				50235	2.2 Hi-Ex 5 g			
50345	3% AFFF Plat 55 g				50240	2.2 Hi-Ex 55 g			
50350	3% AFFF Plat 275 g				50245	2.2 Hi-Ex 275 g			
50130	6% AFFF 5 g				50285	3% Mil-Spec 5 g			
50135	6% AFFF 55 g				50290	3% Mil-Spec 55 g			
50140	6% AFFF 275 g				50295	3% Mil-Spec 275 g			
50355	3X3 ARAFFF Plat 5 g				50270	6% Premium 5 g			
50360	3X3 ARAFFF Plat 55 g				50275	6% Premium 55 g			
50365	3X3 ARAFFF Plat 275 g				50280	6% Premium 275 g			
50385	3X6 ARAFFF Plat 5 g				50300	3% Fluoro 5 g			
50370	3X6 ARAFFF Plat 55 g				50305	3% Fluoro 55 g			
50375	3X6 ARAFFF Plat 275 g				50310	3% Fluoro 275 g			
50145	1% Lo-Temp 5 g				50415	3% Training 5 g			
50150	1% Lo-Temp 55 g				50420	3% Training 55 g			
50155	1% Lo-Temp 275 g				50425	3% Training 275 g			
50115	3% Lo-Temp 5 g				50250	Virtual Foam 5 g			
50120	3% Lo-Temp 55 g				50255	Virtual Foam 55 g			
50125	3% Lo-Temp 275 g				50260	Virtual Foam 275 g			
50205	3X6 Lo-Temp 5 g								
50210	3X6 Lo-Temp 55 g								
50215	3X6 Lo-Temp 275 g								
50400	Bug-Eye 3% 5 g								
50405	Bug-Eye 3% 55 g								
50410	Bug-Eye 3% 275 g								

TOTAL \$

SPECIAL INSTRUCTIONS

FOR BUCKEYE USE ONLY					
ORDER #					
ORDER TAKEN BY					
SALES REP					
CARRIER					
COLLECT		PREPAID		UPS/DHL	
YES	NO	ALL	ADD	ALL	ADD
CA		IL		NC	
NJ		FL		TX	
Verification Initials		PICK-UP	YES	NO	



1. PRINT OUT FORM AND ENTER THE CUSTOMER AND SHIPPING INFORMATION AT THE TOP
2. ENTER THE QUANTITY AND UNIT PRICE (IF KNOWN) OF THE PRODUCT BEING ORDERED
3. ENTER SPECIAL INSTRUCTIONS IF REQUIRED (e.g. LIFT GATE TRUCK, DELIVERY TIMES, ETC.)
4. FAX COMPLETED FORM TO 704.739.7418