

PRECISION SALES

& e q u i p m e n t i n c .

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ATTENTION : ACCOUNTING
CREDIT CARD : VISA - MASTER CARD

NAME ON CARD: _____

CARD NUMBER _____

EXPIRATION DATE _____/_____

SECURITY CODE _____

BILLING ADDRESS _____

PHONE NUMBER _____

Please fax 610-353-1674 or email -eparts@ix.netcom.com the above information.

Should you require additional information please feel free to contact me.
Thank you and best regards,
Precision Sales Inc