



# PURCHASE ORDER REQUEST FORM

COMPLETE AND FAX TO 888-892-5815 — ATTN: PURCHASE ORDERS

*Bill To Name / Address:*

*Ship To Name / Address :*

WINDOW-BARS.COM

Date: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Model Name	Quantity	Notes:

**OR**

Window	Window Type (casement, sliding, double-hung, awning, single-pane/fixe)	Quantity	Window Measurements (Height x Width)	Intended Use (Security or Child Safety?)
1				
2				
3				
4				
5				
6				
7				