



Contact Information

First Name _____

Last Name _____

Title _____

Organization _____

Tax Exempt # _____ (If you are not tax exempt, contact us directly before placing order)

Phone _____

FAX _____

Email _____

Okie Roller	Quantity _____	x \$530 = _____
Mounting Brackets (pair)	Quantity _____	x \$60 = _____
Extra Handle	Quantity _____	x \$60 = _____
Extra Grip	Quantity _____	x \$20 = _____
Wear Guard	Quantity _____	x \$20 = _____
Detent Ring & Lanyard	Quantity _____	x \$20 = _____
All prices include shipping	TOTAL	\$ _____

Shipping Information:

Name _____

Street Address _____

Street Cont. _____

City _____

State _____ Zip Code _____

Additional Comments _____

Please mail this completed form with your money order to:

Okie Roller Inc.
234 W Thatcher
Edmond, OK 73033

You will be notified when your order is processed. Thank you for your business!