

THE BLADE MFG. CO.

915 Distribution Dr. Unit A Columbus, OH 43228

614-294-1649 fax 614-294-8437

SHARPENING ORDER FORM

Please complete this form and enclose with your blades Date:

Billing and Shipping Information	
Bill to Address	Ship to Address
Company Name:	Company Name
Name:	Name
Address:	Address
City, ST Zip	City, ST Zip

Phone:	Payment: Credit Card C.O.D Check (total needed)	
Fax:	Card Type: Visa Mastercard American Express Discover	
Email:	Card Number:	OR <input type="radio"/> CALL FOR #
Ship Via	Exp Date:	
UPS Pick Up Other _____	CW Code:	Billing Zip Code:

QTY	Blade Type circle one	Blade Diameter	Number of Teeth	Material Being Cut Tell us a little abou what the blade is used to cut
	Carbide Tipped Cold Saw, HSS Circular Knife			
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Comments or Request:
