PEZZI®
sport couture

ORDER CONFIRMATION

FACSIMILE TRANSMITTAL SHEET

Date

To: PEZZI INTERNATIONAL FAX: 305-722-1944

SALES REP CODE _____ PAGES ( ) INCLUDING COVER

PLACE A CHECK MARK FOR NEW ACCOUNTS

ACCOUNT NO.	CUSTOMER NAME	NEW ACCOUNT	SALES ORDER P/O #	CONFIRMATION
		( )		( )
		( )		( )
		( )		( )
		( )		( )
		( )		( )
		( )		( )
		( )		( )
		( )		( )
		( )		( )

PROCESSED BY: CUSTOMER SERVICE

EMPLOYEE NAME DATE