



4 Leonard Way
Deposit NY 13754
607-467-3100

Customer Contact Information

Customer Name _____

Mailing Address:

Street _____

City _____ **State** _____ **Zip** _____ **County** _____

EIN Number: _____

Ship to: If different from above

Street _____

City _____ **State** _____ **Zip** _____

Phone # _____

Fax# _____

E-Mail _____

Contact Name _____

Taxable Yes No

If not taxable please fax resale certificate to Gina @ 607-467-4550 or e-mail to ginad@leonardbus.com

Tax ID # _____

Amount of credit desired: _____

Do you require a Purchase Order Number? Yes No