



KEIR POINT-OF-SALE SHARPENING STONES ORDER FORM

Enclosed is my check for \$_____ for __ boxes @
Qty. 60 per box.

Credit Card Name: _____

Credit Card # _____

Credit Card Expiration (mm/yy) ____/ ____

Ship Order To:

Name: _____

Address: _____

City: _____ State/Zip _____

Phone: () ____ - _____ Fax: () ____ - _____

Contact Name: _____

**Please print our personalized stones to read as follows:
(one line; 20 characters or spaces maximum)**

KEIR MFG., Inc.
133 McLean Road
Brevard, NC 28712-9456

Tel: 828 / 885.8444 Fax: 828 / 884.7494
e-mail: sales@KEIRmfg.com