

Order Form

Make A Copy of this order form before sending to us.

Sold To:

My address has changed This is the first time I've ordered from Leedstone
 Name _____
 Account # _____
 Address _____
 City _____ County _____ State _____ Zip _____
 Phone (for questions about your order) _____
 Best Time to Call _____
 Email Address _____

Phone: 877.608.3877
Toll-Free

Fax: 877.223.3783
Toll-Free

Mail:

 222 County Road 173 SE
 Melrose, MN 56352

Ship To:

(Please complete if different from address above)

Name _____
 Address _____
 City _____ County _____ State _____ Zip _____

When You Need More Order Forms


1. Make a copy of this order form, leaving the original in the catalog for future use.
2. Download a PDF version of this order form from our website (Leedstone.com).
3. Or call us at 877.608.3877 to request additional forms.

Item #	Description	Page #	Size	Qty	FOB Weight	Unit Price	Total Amount	Total FOB Weight

Occasionally, we may be unable to ship an item at the time we receive your order. If this occurs, should we:

- Substitute an equivalent product?
- Back order and ship to you within 14 days?
- Call to notify you and you can decide at that time?
- Cancel that portion of your order?

We work hard to meet the needs of our customers and value your comments or suggestions. Please indicate additional products you would like us to offer in our catalog.

SUBTOTAL	
Minimum Order Charge	
FOB Item Charge Total	
 Hazardous Shipping Fee Total	
MN: 6.875% CO: 2.9% GA, NY: 4% SD: 4.2% NC: 4.75% ND, WI: 5% VA: 5.3% NE: 5.5% OH: 5.75% IA, ID, KY, MD, MI, PA, VT: 6% IL: 6.25% KS: 6.5% IN: 7%	
SALES TAX	
For ag sales tax exempt forms, call 877.608.3877.	
(Please pay this amount) TOTAL	

Payment Method:

Check enclosed

Personal or business checks are deposited immediately and, unless you are an established customer, orders will be held for 10 business days until your check clears the bank. All returned checks will be assessed the allowable state service fee.

Money Order enclosed



Visa

Credit Card # _____



MasterCard

Expiration Date: _____

Validation Code: _____
(Can be found on back of credit card.)



Discover

Cardholder Name: _____



American Express

Cardholder Signature: _____

Thank you for your order!



John Deere Financial

Card # _____

Cardholder Signature: _____