



ORDER BLANK

Cat 48-294 - Expires MAY 31, 1994

MAIL TO:



Andy H Weaver



16891 Farmington Road
West Farmington OH 44491

OUR MARK OF QUALITY

NAME:

(Shipping to a different address, write that name and address below)

CUS#:

Customer Number -
if known (Front Cover)

ADDRESS:

(On PO Box, give street address also) - if address has changed - please give old address below

CITY:

STATE:

ZIP:



ITEM NO.	HOW MANY?	NAME OF ITEM	KEY Harmonica Orders	PRICE EACH	TOTAL
PREFERRED CUSTOMER DISCOUNT COUPONS - ATTACHED					—
Nameplates (if any) Total					\$
<input type="checkbox"/> MY ORDER TOTALS \$20.00 OR MORE - INCLUDE MY FREE GIFT!					FREE

10 DAY MONEY BACK GUARANTEE!

(Returns/exchanges are subject to a shipping/handling/re-ship charge - minimum of \$3.00)

There is a \$15.00 Bank Service Charge on all returned checks.

HARMONICAS can not be exchanged or returned for credit due to their personal use. This is not permitted under LAW. (Any defects will be handled by HOHNER directly at no charge.)

ALL PRICES INCLUDE SHIPPING AND TAX!

On orders of less than \$10.00, add \$2.00 Handling Charge

FREE SHIPPING!

On orders of \$10.00 or more

TOTAL ENCLOSED

NO EXTRA HIDDEN CHARGES!

SHIPPING TO A DIFFERENT ADDRESS (Use only if Ship To is different than above)

SHIP TO: _____

ADDRESS: _____

CITY/ST: _____ ZIP: _____

Send Invoice to Customer above _____ or to Ship To _____

ALL our items come with a written guarantee. ALWAYS follow instructions on that guarantee; should any problem occur.

PROMPT SHIPMENTS: We usually ship the same day the order is received. If you place an order by mail or phone and do not receive it or hear anything for 10 days; call us at our toll free number.

SHIP TO ANOTHER ADDRESS? We are happy to ship your order to another address if you so desire. Tell us if you wish to have the invoice sent to you or if it should go with the order to the shipping address. We are also glad to enclose a card in your name on gift

IF YOU HAVE MOVED OR IF YOUR ADDRESS HAS CHANGED:

Please give us your OLD ADDRESS here:

Old Address: _____

City/St: _____ Zip: _____

- ☐
- ☐
- ☐
- ☐

CHECK

MONEY ORDER

VISA/MC/DISCOVER

CASH (NOT RECOMMENDED)

CARD NUMBER

EXPIRATION DATE



Signature

(NEEDED FOR CHARGE CARD ORDERS ONLY)