GENESCO/JOHNSTON & MURPHY LASER LABEL ORDER FORM

ORDER DATE :

BILL TO :

COMPANY NAME : _____

ADDRESS : _____

_____

_____

ATTN: _____

TEL: _____

FAX: _____

SHIP TO :

COMPANY NAME: _____

ADDRESS : _____

_____

_____

ATTN: _____

TEL: _____

FAX: _____

SHIPPING INSTRUCTIONS: ☐ AIR FREIGHT ☐ FEDERAL EXPRESS

☐ DHL ☐ UPS

☐ OTHERS_____

GENESCO PO NUMBERS		GENESCO PO NUMBERS	

Please send order form to:
Refer to the Avery Dennison contact list for the appropriate address to submit your order to.
http://www.genescopartners.com/jm/jm_contacts.php