No. 00000001



Customer Consignment Order Form

1718 W. Mishawaka Road Elkhart, IN 46517							
Order Date: Desired I		Desired Delivery [red Delivery Date*: KB/ML Order #:				
Purpose:							
*Approved orders of in-stock items typically ship within 10 business days							
^Approved ord	lers of in-stock items	typically ship withi	n 10 business days				
Ship To Customer Number: N/A Name:							
			Name:				
Cola 10 Cacion	ner Number: N/A			Attn:			
Name:							
Address:							
City:			State:		Zip Code:	.	
Phone:			To Be Returned: 30 Days 60 Days 90 Days		Return Date:		
00	Due do et Niere	-()4-1-1	O a miral	Data Data	DA #	Link Online	T-1-11/-1
Qty.	Product Nam	ie/Model	Serial	Date Due	RA#	Unit Selling	Total Value
			Number	Back	(KA Order #)	Price	
	•		•	•	•	Total	\$ -
	Please s	send back with act	ual signature				
Consultancy:							
Requested By:				 Date:			
	Memo Loan Acct #:	N/A					
Approved By:			- /	Date:			
,	Cost Center #:						
Data Entry By:			-	Date:			
, ,							
In receipt of this	agreement you ackno	wledge that you will	be fully responsible for	or any product or produ	ucts that Harman provide	es to you, either on o	consignment
					at is received back by Ha		
					by Harman, you will be re		
					result in billing at the un		
. Iaiman at tile t	and soming price listed t	and statement. T	and to return product	no sy agrosa date Will	Toodic in billing at the un	it coming price nateu	abovo.
For Finance Lle	e Only:						
For Finance Use Only: Delivery Doc. # (s) Goods Issue Doc. # (s)						I	
DOIIVELY DOO. # (3)		1		Goods Issue Di	υυ. # (δ)		

White: Data Entry Pink: Originator Yellow: Customer