

ORDER FORM - QUICK SHIP

ACCESS CONTROL

THIS FORM IS THE PURCHASE ORDER. DO NOT SEND A COVER P.O.
DUPLICATED ORDERS CANNOT BE RETURNED.

1-860-225-7411
www.corbinrusswin.com

FAX: 800-338-0965

EMAIL: qsorders.corbinrusswin@assaabloy.com

CUSTOMER P.O. NO. _____ DATE _____
 CUSTOMER _____
 CUSTOMER ACCT. NO. _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 BUYER _____ TITLE _____
 SHIP GOODS TO _____
 ADDRESS _____
 ATTN TO _____
 CITY _____ STATE _____ ZIP _____
 SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

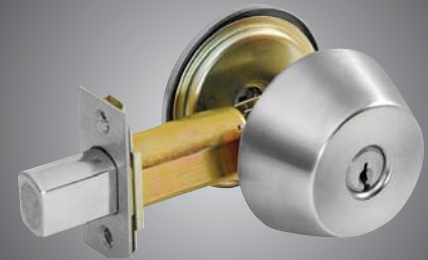
24-Hour (Q0) **1-Week (Q1)** **2-Week (Q2)**
 Quote #: _____ Quote #: _____

ORD NO.

Program	Qty	Series/ Function	Trim	Finish	Hand	Misc. Options	Optional Cylinder

ORDER FORM - QUICK SHIP

AUXILIARY LOCKS



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 CUSTOMER _____
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 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 BUYER _____ TITLE _____
 SHIP GOODS TO _____
 ADDRESS _____
 ATTN TO _____
 CITY _____ STATE _____ ZIP _____
 SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

24-Hour (Q0) **1-Week (Q1)** **2-Week (Q2)**
 Quote #: _____ Quote #: _____

ORD NO.

Program	Qty	Series/Function	Finish	Misc. Options

ORDER FORM - QUICK SHIP

CYLINDRICAL LOCKS

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 CUSTOMER _____
 CUSTOMER ACCT. NO. _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 BUYER _____ TITLE _____
 SHIP GOODS TO _____
 ADDRESS _____
 ATTN TO _____
 CITY _____ STATE _____ ZIP _____
 SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

24-Hour (Q0) **1-Week (Q1)** **2-Week (Q2)**
 Quote #: _____ Quote #: _____

ORD NO.

Program	Qty	Series/ Function	Trim	Finish	Hand	Misc. Options	Keying

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EXIT DEVICES

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 CUSTOMER _____
 CUSTOMER ACCT. NO. _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 BUYER _____ TITLE _____
 SHIP GOODS TO _____
 ADDRESS _____
 ATTN TO _____
 CITY _____ STATE _____ ZIP _____
 SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

24-Hour (Q0) **1-Week (Q1)** **2-Week (Q2)**
 Quote #: _____ Quote #: _____

ORD NO.

Program	Qty	Exit Device	Trim/Function	Finish	Hand	Cylinder Option	Hand



ORDER FORM - QUICK SHIP

MORTISE LOCKS

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CUSTOMER P.O. NO. _____ DATE _____
 CUSTOMER _____
 CUSTOMER ACCT. NO. _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 BUYER _____ TITLE _____
 SHIP GOODS TO _____
 ADDRESS _____
 ATTN TO _____
 CITY _____ STATE _____ ZIP _____
 SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

24-Hour (Q0) **1-Week (Q1)** **2-Week (Q2)**
 Quote #: _____ Quote #: _____

ORD NO.

Program	Qty	Series/ Function	Trim	Finish	Hand	Misc. Options	Optional Cylinder

ORDER FORM - QUICK SHIP

CYLINDERS/KEYS



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CUSTOMER P.O. NO. _____ DATE _____

CUSTOMER _____

CUSTOMER ACCT. NO. _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUYER _____ TITLE _____

SHIP GOODS TO _____

ADDRESS _____

ATTN TO _____

CITY _____ STATE _____ ZIP _____

SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

24-Hour (Q0)

1-Week (Q1)

2-Week (Q2)

Quote #: _____

Quote #: _____

ORD NO.

Program	Qty	Cylinder Option	Cylinder Type	Finish

ORDER FORM - QUICK SHIP

DOOR CLOSERS

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CUSTOMER _____

CUSTOMER ACCT. NO. _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUYER _____ TITLE _____

SHIP GOODS TO _____

ADDRESS _____

ATTN TO _____

CITY _____ STATE _____ ZIP _____

SHIP VIA _____ STD. CARRIER _____ (OTHER) _____

Program:

FOR EDITING, DO NOT WRITE

24-Hour (Q0)

1-Week (Q1)

2-Week (Q2)

Quote #: _____

Quote #: _____

ORD NO.

Program	Qty	Warehouse #