

Browning Store Employee BAR Rifle Order Form

Employee Name _____

Home Address _____

City _____ Post Code _____

Phone (Work) _____ Phone (home) _____

| Description | Model Number | Special Employee Price |
|-------------|--------------|------------------------|
| | | |

Sales tax _____

Total _____

Name of Employer's Store _____

Browning Dealer Name _____

Store Address _____
Street
City
Post Code

Phone (work) _____ Phone (home) _____

Store Owner/Manager Signatu _____ Date _____

Browning Sales Rep Signature _____ Date _____

National Sales Manager Sign _____ Date _____