



**NOBLE HOUSE, INC.**

10010 Pioneer Blvd., Ste. - 101  
Santa Fe Springs, CA 90670-6233, USA  
Tel: 562-801-9915, Fax: 562-801-9916  
Email: info@noblerugs.com  
website: www.noblerugs.com

# Sales Order

Sales Order No.: \_\_\_\_\_  
Sales Order Date: \_\_\_\_\_  
Customer ID No.: \_\_\_\_\_  
Customer Resale No.: \_\_\_\_\_  
Name of Customer : \_\_\_\_\_

**BILL To:**

**SHIP To (If other than Bill To) :**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ITEM	QUALITY	COLOUR	DESIGN	SIZE	PIECES	TOTAL SQ.FT.	UNIT PRICE	TOTAL
				. X .				
				. X .				
				. X .				
				. X .				
				. X .				
				. X .				
				. X .				
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				. X .				
				. X .				
				. X .				
				. X .				
				. X .				

**PAYMENT METHOD:**

Credit Card: <input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover	
Credit Card Account Number	Expiration
Name of card holder	Amount
Address of Card Holder	
Street:	
City:	State: Zip:

SUBTOTAL	
SALES TAX (WHERE APPLICABLE)	
SHIPPING & HANDLING CHARGES	
OTHER CHARGES (IF ANY)	
<b>TOTAL DUE</b>	

Remarks/Comments:
Delivery:

Check Number	Date	Amount

\_\_\_\_\_ Customer's Signature \_\_\_\_\_ Date