

# ORDER FORM

## SEATTLE METRO SOFTBALL UMPIRES ASSOCIATION UNIFORM/EQUIPMENT ORDER

NAME \_\_\_\_\_ DATE ORDERED \_\_\_\_\_  
DATE DELIVERED \_\_\_\_\_

PAYMENT METHOD CASH \_\_\_\_\_ CHECK # \_\_\_\_\_ ON ACCOUNT \_\_\_\_\_

### ITEMS ORDERED

ITEM DESCRIPTION	SIZE	QUANTITY	PRICE	TOTAL	ORD'D	REC'D
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>



SUBTOTAL: \$ \_\_\_\_\_

TOTAL AMOUNT DUE \$ \_\_\_\_\_

**TOM DILLON**  
c/o Kidder Mathews  
500 108th Ave NE, Ste 2400  
Bellevue, WA 98004  
(425) 450-1138 WORK  
(425) 213-9917 CELL  
[tdillon@kiddermathews.com](mailto:tdillon@kiddermathews.com)

\_\_\_\_\_  
UMPIRE SIGNATURE/SALES AGENT INITIALS  
ACKNOWLEDGEMENT OF ORDER PLACED WITH SMSUA

"On account" form sent to Treasurer