

Leominster Micro Welding
 Specializing in
 Microscopic Laser & TIG
 Tools • Dies • Medical • Prototype

51 Howard Street
 Leominster, MA 01453
 www.leommicroweld.com



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Custom Work Order for Leominster Micro Welding

| Date | Purchase Order Number | Service Requirements |
|------------------------|-----------------------|---|
| | | ___ 24 Hours ___ 1-3 Days ___ 2-5 Days ___ Other _____ |
| Company Name | | Contact Name |
| | | |
| Company Address | | Contact Email Address |
| | | |
| | | Contact Telephone Number and Fax |
| | | Phone: Fax: |

| Quantity | Item Description |
|----------|------------------|
| | |
| Quantity | Item Description |
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| Quantity | Item Description |
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| Quantity | Item Description |
| | |

Please use this area for sketching and writing comments. (Attach a PDF if necessary)

| Return Shipping Instructions (All Shipments Must be Insured) | |
|--|---|
| <input type="checkbox"/> UPS | <input type="checkbox"/> Next Day Air <input type="checkbox"/> NDA Saturday <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day <input type="checkbox"/> Ground |
| <input type="checkbox"/> FedEx | <input type="checkbox"/> Next Day Air <input type="checkbox"/> NDA Saturday <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day <input type="checkbox"/> Ground |
| <input type="checkbox"/> USPS | <input type="checkbox"/> Overnight Express Mail <input type="checkbox"/> 2-3 day Priority Mail <input type="checkbox"/> 2-9 day Ground Parcel Post |
| <input type="checkbox"/> Freight | <input type="checkbox"/> (Specify Carrier and Level of Service) |
| <input type="checkbox"/> Customer Pickup (Call First to Arrange a Pickup Time) | |