



SHIP TO:
APB & ASSOCIATES
PACIFIC COAST HIGHWAY
NUMBER 716
TORRANCE, CA. 90505

From: _____

Street Address: _____

City, State, Zip code: _____

Phone Number: _____

Date Shipped: _____

Quoted price(s): _____

Shipping Label

Instructions:

Converters only:

Include quoted pricing from APB (print out of quote sheet).

Pack your converter(s) well. Do not pack with "Peanuts".

Please use strong packing tape. We pay for only what is received.

Place Shipping Label(s) in container(s)

For Office Use Only

Date received: _____

Converters Rec'vd _____

Amount paid: _____

Check #: _____

Date Check Mailed: _____

Please include your company resale permit #

For individuals, please fill in your Driver's License # (and include a copy)

By signing below, you guarantee that:

- A. You are either the owner, or are authorized to sell these items to us.
- B. That you have not been convicted of metal theft.
- C. You have read and agree to the "Disclaimer" at www.APBint.com

Signature: _____

Date: _____