

## Heirloom Arms

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Jean van Oppen

# Customer Order Form

DATE


### Customer Information

First and Last Name  
Billing Address 1  
Billing Address 2  
City, State Zip  
Email Address  
Phone Number

Project Name  
Quantity  
Special Request/Instruction

### SHIP TO

Licensed Firearm Dealer Shop Name  
Address 1  
Address 2  
City, State and Zip  
Email  
Phone