Kohannah Bows

3023 Swartz Road
LaSalle, MI 48145
(734) 241-7005
bob@kohannahbows.com

OFFICE USE

Order Date _____

Serial No. _____

Shipping Date _____

Shipping Address (if different than billing address)

Name _____ Name _____

Street _____ Street _____

City _____ City _____

State _____ Zip _____ State _____ Zip _____

Phone ( ) _____ E-Mail _____

Bow Model	Length	Weight	Draw	Right or Left Hand	**Price**
					$

Please Print Name To Appear On Bow (optional)	☐ 3 Fingers Under	N/C
Riser Wood	Grip ☐ Sm. ☐ Med. ☐ Lg.	N/C
Locator ☐ Thumb Rest ☐ Thumb Rest & Palm Swell ☐ Palm Swell	Elk Leather ☐ Black ☐ Dk. Brown Riser Wrap ☐ Lt. Brown ☐ Beads	N/C
Limb Core	Veneer Limb (Extra Charge) Please List Veneer Type ☐	$
Stain Under Clear Glass ☐ No ☐ Black ☐ Lt. Brown ☐ Med. Brown ☐ Dk. Brown		N/C
Tip Overlay ☐ Tan ☐ Red ☐ Black ☐ Antler (Extra Charge) ☐ White	Finish ☐ Satin ☐ Matte	$
Extra Set of Limbs ☐ Length Materials		$

EXTRAS	Bow Total	$

Item Description	Price	Quantity	Price

Payment method

☐ Visa ☐ MasterCard ☐ Check No. _____ ☐ Cash

Credit Card Number

Expiration Date of Card Month | | - Year | |

Card Verification Number | | |

Subtotal	$
Shipping & Handling	$
Deposit (*see below)	$
Balance Due	$
Payment $	$
Payment $	$

*MINIMUM NON-REFUNDABLE DEPOSIT $100 REQUIRED WHEN PLACING ORDER

Prices subject to change without Notice