## ORDER FORM

## (For WLD listed products and licensed retailers only)

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Customer # City \_ Licensee Name \$ Amount of Order Date **Authorized Signature** FULL CASE ITEMS (Use Black Ink Only) Quantity W.L.D. Code Quantity W.L.D. Code Quantity W.L.D. Code Quantity W.L.D. Code Ordered Number Ordered Number Ordered Number Ordered Number SPLIT CASE ITEMS (Please order by number of bottles or packs/cartons) Btl Btl Btl Ctn Ctn Ctn Ctn