

FROM: COMPANY: PHONE:

DATE: PO #: Cust #: S/N:

**ENSTROM PARTS ORDER**

Quantity	Part Number	Aircraft S/N	Description

**BILL TO ADDRESS:** (NAME, ADDRESS, PHONE, CONTACT)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SHIP TO ADDRESS:** (NAME, ADDRESS, PHONE, CONTACT)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FAX: 906-863-6244  
EMAIL: hklein@enstromhelicopter.com  
PHONE: 906-863-1200 EXT 139

FORM OF PAYMENT:   
MasterCard/Visa/Check/Other

SHIPPING METHOD- DHL/UPS/FedEx/Other

Credit Card: \_\_\_\_\_ EXP: \_\_\_/\_\_\_

Order Type: \_\_\_ REGULAR \_\_\_ AOG \_\_\_ EXCHANGE \_\_\_ OTHER \_\_\_\_\_  
\_\_\_ WARRANTY Fill out warranty forms and submit for credit

**ORDER COMMENTS:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_