



ORDER DATE: _____

SALESPERSON: _____

CUSTOMER INFORMATION

Name: _____ Farm Name: _____

Phone: _____ Email: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Name & Phone Number of Person that Recieves Shipment: _____

ORDER INFORMATION

PRODUCT	QUANTITY	UNIT PRICE	TOTAL
REVLIN [®] HOPPER THROTTLE [™] CORN			
REVLIN [®] HOPPER THROTTLE [™] SOYBEAN			
REVLIN [®] HOPPER THROTTLE [™] DRY BEAN			
		Subtotal	
		Tax	
		TOTAL	

BILLING INFORMATION

How would you like to recieve product? ☐ Pick up at 21st Century Equipment
☐ Arrange with Republic Chemical Representative

☐ Billing address same as shipping above

Billing Address: _____

City: _____ State: _____ Zip: _____

John Deere Credit #: _____ ☐ Check if we have permission to bill

Requested Delivery Date: _____ John Deere account



BROOKE HATFIELD, CUSTOMER SERVICE | bhatfield@republicchem.com | 308-737-0941

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