

Dealer: _____

Date Ordered: _____

Board #: _____

Salesman: _____

Date Due: _____

Name: _____

Phone: _____

Address: _____

City: _____

State: _____ Zip: _____

Email: _____

Age: _____ Height: _____

Ability: B I A Weight: _____

Model: _____ Stock: _____

LG: _____ WD: _____ TH: _____

E-Type Polyurethane

Glass Top: _____

Decals: _____

Glass Bot: _____

Decals: _____

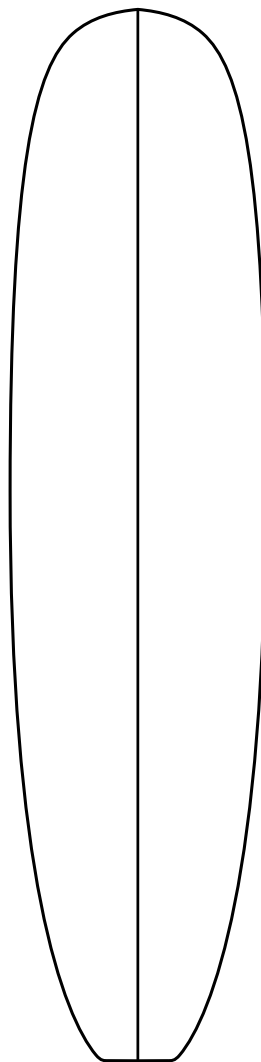
Finish : SAND ONLY SAND GLOSS POLISH GLOSS

Side Boxes:
1 2 3 4 5

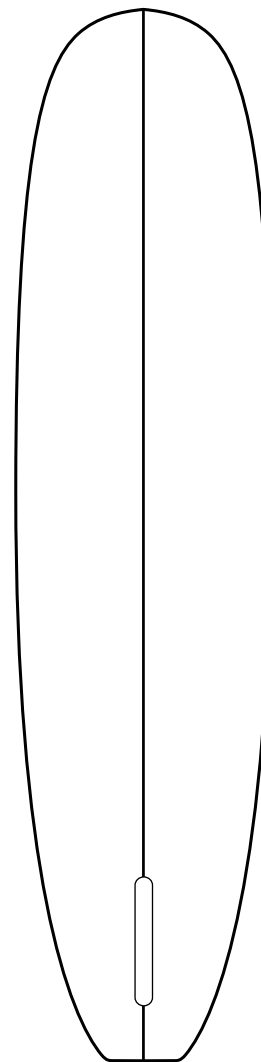
Center Box:
M L

Leash Plug: L C R DRILL BOX

Top



Bottom



Stewart

Ph: 949-492-1085 Fx: 949-492-2344
boardsales@stewartsurfboards.com

Board #: _____

Comments:

Painted

Resin Color

Clear