



Date: _____
 PO # _____

From:
 Name: _____
 Company _____
 Address _____
 Address _____
 City _____
 State,zip _____
 Telephone _____
 Email _____

Ship to us:
 Attn: _____
 Geib Refining Corp.
 399 Kilvert St.
 Warwick, RI 02886

Material Description

Assay For:

Shipping Weights

Unit of Measure

___ Gold
 ___ Silver
 ___ Platinum
 ___ Palladium
 ___ Rhodium

| | Item 1 | Item 2 | Item 3 |
|-------|--------|--------|--------|
| Gross | | | |
| Tare | | | |
| Net | | | |

___ Grams
 ___ Pennyweights
 ___ Troy ounces
 ___ US Pounds

Special Instructions

Stone Removal ? _____ Please circle Yes No
 Method of Payment: _____
 Other: _____

