RED WING SHOES®

SALES SLIP NO. 919227

(STORE STAMP)
BECK'S SHOE STORE,
354 MAIN STREET
SALINAS, CA 93901

DATE 3/12/19 COMPANY MBARI PLANT _____

Name Emery ~~Watson~~ Nelson Phone _____

Address _____ State _____ Zip _____

Clock # _____ Dept. # _____ Other # _____

☐ Cash ☐ Check ☐ Discover ☐ Mastercard ☐ Visa ☐ Other

Credit Card # _____ Exp. _____

TRANSACTION TYPE (SALE, CREDIT, RETURN)	STOCK #	SIZE	WIDTH	DESCRIPTION	AMOUNT
	93216	8	D		200.00
				-15%	(30.00)

SPECIAL ORDER ADDRESS R.G. #

SHOES ORDERED _____
SHOES RECEIVED _____

NO. OF DEDUCTIONS _____
AMOUNT PER CHECK $ _____

SUBTOTAL	170.00
TAX	15.73
TOTAL	185.73
COMPANY SUBSIDY	
EMPLOYEE PAID	
PAYROLL DEDUCTION	
TOTAL BILLED TO COMPANY	185.73

STANDARD CLASSIFICATION
ASTM F 2413-05, I / 75, C / 75
AMERICAN SOCIETY FOR TESTING AND MATERIALS

I HEARBY AUTHORIZE _____
(Company Name)

TO DEDUCT THE ABOVE AMOUNT OUT OF MY PAYCHECK(S). IF MY EMPLOYMENT IS TERMINATED, THE REMAINING AMOUNT WILL BE TAKEN OUT OF MY FINAL PAYCHECK.

_____ 12/12/19
Employee Signature Date

ALL RETURNS MUST BE ACCOMPANIED BY SALES SLIP

WHITE (Original) GREEN (File Copy) YELLOW (Company Copy) PINK (Invoice Copy) GOLD (Customer Copy) 85028 Rev 02/13