

**C.O.M. (Customer's Own Material)**

We're happy to honor your C.O.M. request, but because we can't schedule your order until we know when your C.O.M. will arrive at our facility, we ask that you please complete this form. This will help us get your order out on time. Please send your C.O.M. two weeks prior to the ship date of your order. If we have any questions, we'll reach out shortly.

**Ship to Address:**

1250 84th Street SW  
Byron Center, MI 49315

**Shipping Contact:**

(866) 453-4748  
Shipping Hours: 7:30am-5:00pm

Your Company Name: \_\_\_\_\_  
Your Purchase Order #(s) to Grand Rapids Chair Co.: \_\_\_\_\_  
GRCC Customer Service Rep: \_\_\_\_\_

**C.O.M.**

Manufacturer/Mill/Fabric House: \_\_\_\_\_  
Pattern Name and Number: \_\_\_\_\_  
Color Name and Number: \_\_\_\_\_  
Repeat?: \_\_\_\_\_  
If Directional how should we apply it? \_\_\_\_\_  
Yardage Ordered: \_\_\_\_\_  
Expected Ship Date to GRCC: \_\_\_\_\_  
Your PO# to COM Supplier: \_\_\_\_\_  
GRCC Product COM is for: \_\_\_\_\_  
P.O. Item/Line #: \_\_\_\_\_  
Product Name and Number: \_\_\_\_\_

\*If seat and back fabric are different, please clearly note: