Louthan Gunworks

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WORK ORDER Name:		No PO Boxes Address:	
Email Address:			Zip:
DESCRIPTION OF WORK			
Make:	Model:	Cal:	Serial #:
Please list all work to be done:		Work/Color/Pattern:	
Ex. AR15 Lower Receiver		Cerakote Black	
For more space use back of	form		
If sending in a serialized f do so will result in delays.		e a photocopy of your curren	nt Driver's License or FFL. Failure to
If Coating, is Disassembly/F	Reassembly by Louthan Gu	nworks Required	□ No □ Yes
Notes/Comments:			
	2		
How did you hear about us?	!		
Signature:		Date:	