



Order Sheet for Elephant Trunk Mats

Your Shipping Information

Name _____

Address _____

City, State, Zip _____

Contact Phone _____

Contact Email _____

Make of Car _____

Year _____

Model _____

Trunk Mat Part # _____ Trunk Mat Pattern # _____

NOTES: _____

Mail This Order Sheet and Your Check To:

Elephant Trunk Mats
1257 37th Street
Rock Island, IL 61201

Questions?

309-716-1027