

ORDER FORM

KRIEGER BARRELS, INC.

DATE: _____

**2024 MAYFIELD ROAD
RICHFIELD, WI 53076**

PHONE: 262-628-8558 FAX: 262-628-8748

NAME _____ PHONE NO. Days _____

COMPANY _____ PHONE NO. Evenings _____

ADDRESS _____ FAX NO.: _____

CITY _____ STATE _____ ZIP _____

BOLT QTY: _____ SS or CM *circle one* CALIBER: _____ TWIST: _____ CONTOUR # _____

(See Page 2.)

Muzzle Diameter: _____ at Finished Length of _____ Breech Length if non-std _____

(See page 2.)

(Barrel Blank will be 1" longer than finished length.)

Circle One: Sporter Straight taper Palma No Taper/Straight Cylinder

SERVICES _____

FITTING at Krieger Barrels? If so, please list cartridge & type of action above.

FLUTING? Need accurate finish length

M1A/M14 QTY: _____; SS or CM; TWIST: _____ HEAVY or GI or BUSH

SERVICES _____ \$60 Short Chamber: Y or N

M1G/M1 QTY: _____; SS or CM; TWIST: _____; .308 or 30-06 HEAVY or GI

SERVICES _____ \$60 Short Chamber: Y or N

DCM/M16 QTY: _____; SS or CM; TWIST: _____; PRE-BAN or POST-BAN *(Circle one.)*

SERVICES _____ \$100 CHAMBER: Y or N

____ .223 Rem ____ 5.56 Match

AR-15 QTY: _____; SS only; TWIST: _____; .920 .812 .720 muzzle dia.

(Circle one.)

FIN. LEN.: _____ (26" maximum) \$100 CHAMBER: Y or N

____ .223 Rem ____ 5.56 Match

SERVICES _____

Method of Payment: _____ Payment Enclosed _____ Please bill _____ Open Account *(on file)*

_____ CREDIT CARD Signature: _____

Visa _____ Master Card _____ Amer Expr _____

(Enter 3-digit Security Code from signature line on back of card.) (Amer Expr has a 4-digit Code on front of card above acct. #.)

CRDCARD # _____ Exp. Date _____

(Please enter address below for credcard if different from address at top of form)
