



REPLACEMENT PARTS ORDER FORM

Please fill in the following information and return to:

Fada/Geneva Watch Company
47-50 33rd Street
Long Island City, NY 11101

Fax: 718.707.9650

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____

WORK PHONE: _____

STYLE NUMBER: _____

REQUESTED REPAIR/REPLACEMENT PART:

METHOD OF PAYMENT:

Check Visa Mastercard

Number on Card: _____

Expiration Date: _____

CHARGE TOTAL: _____

SIGNATURE: _____