



2011 Fuel Order Form

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Day Phone: _____ **Cell Phone:** _____

Fax: _____

Fuel Order: 55 gallon drum 110 Octane, Quantity: _____

(cost may vary depending on cost to Tom)

Deliver to the following event:

Date: _____ **Track:** _____

Signed: _____

Fax to Tom Elam @ (541) 439-3781 (home and Fax)

Tom Elam's cell phone: (541) 404-0210

SCRS Administration Office, P.O. Box 4432, Paso Robles, California 93447 (mail only)
Dverstuyft@aol.com 805-467-2640 (phone and fax) info@stockcarraceseries.com