

S.O. # _____



Inv. # _____

ORDER FORM

Date: ___/___/___ Quote # _____ Customer ID: _____ PO# _____

Company: _____ VIA: UPS GROUND 3 DAY 2 DAY USPS

Contact: _____ FEDEX PRIORITY STANDARD OTHER

Tel: _____ International _____

Email: _____ Freight Collect _____

CC Billing Address: _____ Shipping Address: _____

Payment Terms: CC NET30 WIRE TRANSFER OTHER: _____

Card Holder Name: _____ Phone: _____

Email Invoice; Same EM: Y N _____

Email Credit Card Receipt: Y N _____

Credit Card Type: VISA MASTERCARD DISCOVER AMEX

Credit Card #: - - - Exp. Date: _____

3 Digit Security # on Back of CC: _____ (For AMEX this is a 4 digit number on the front of card)

QTY	DESCRIPTION	UNIT PRICE	AMOUNT

SPECIAL NOTES:

Sub Total: _____
CA Sales Tax: _____
Freight: _____
TOTAL: _____