

Waggoner

Order Form

Name: _____

Date: _____

Seen Where: _____

Phone Office: _____

Cell: _____

Email: _____

Shipping Address

Address: _____

Address 2: _____

City: _____

State: _____

ZIP: _____

Billing Address (Please check box if same as shipping)

Address: _____

Address 2: _____

City: _____

State: _____

ZIP: _____

Quantity	Product Description	Price each	Price ext.
	Waggoner Computerized Color Vision Test (App Only)	\$795	
	Waggoner CCVT Preinstalled on Microsoft Tablet	\$2,195	
	Color Vision Testing Made Easy	\$110	
	Waggoner PIP24	\$195	
	Waggoner Quick Six	\$80	
	TestingColorVision.com (Online Testing)	Depends	
		Subtotal	
		Tax (AR, CA, FL only)	
		Shipping (to be determined)	
		Total	

Method of Payment: Am Exp Visa M/C Cash Check # _____

Card # _____ CCV code # _____ Exp. Date _____