## **Order Form**



How did you hear about us:				
Purchase Order #:				
Company Name: Cus	Customer Name:			
Billing Address:				
City: State:	Zip Code:			
Phone: () Fax: ()	Email:			
Is Billing Address same as Shipping Address:	□ No			
Shipping Address:				
City: State:	Zip Code:			
Phone: () Fax: ()	Email:			
Payment Method:   Check   Credit Card	□ Net Terms			
Type of Credit Card: □ MasterCard □ Visa		Discover	☐ Amex	
Credit Card # Expiration Do	ate:	Security	Code:	
Name as it appears on card (Please Print):				
Signature: Date:				
Shipping Method: ☐ UPS ☐ US MAIL ☐	3RD PARTY			
		Provide Shi <sub>l</sub>	oper#	
Part # Item Description (Brief)	Qty	Price per Item	Total Price	
		Price per Item		
	-	Discount (If Any) CC Fee 3%		
	}	Shipping		
		TOTAL		