

# Order Form - For Fax, Phone or Mail-in Orders

**COMPANY NAME:** \_\_\_\_\_ **ACCT. NO.:** \_\_\_\_\_

**PO #:** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**ORDERED BY:** \_\_\_\_\_

Have you ever ordered from us before? ( ) Yes ( ) No

**SHIPPING ADDRESS:** \_\_\_\_\_ **BILLING ADDRESS:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

QTY.	PART #	DESCRIPTION	PRICE EA.	TOTAL

**SPECIAL NOTES:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**PLEASE SHIP:** Regular Ground UPS ( )      UPS Next Day Air ( )  
 UPS 2nd Day Air ( )      Other ( ) \_\_\_\_\_

**PAYMENT METHOD:** Bill Account ( )      Credit Card ( )  
 Prepay ( )      Wire Transfer ( )

**ALL IN-STOCK ITEMS  
 WILL BE SHIPPED  
 THE DAY YOUR ORDER  
 IS RECEIVED!**

Authorized Signature: \_\_\_\_\_

Ship to the Attn. of: \_\_\_\_\_

