



Date: \_\_\_\_\_

**Customer Information**

**Bill To:**

Name: \_\_\_\_\_  
*Exactly as it appears on credit card*

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, ST ZIP Code: \_\_\_\_\_

Phone, Fax: \_\_\_\_\_

**Ship To (if different from above):**

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, ST ZIP Code: \_\_\_\_\_

Phone, Fax: \_\_\_\_\_

**Credit Card Information**

**Credit Card Type: (check one)**

American Express®  Visa®  MasterCard®

**Credit Card Number:** \_\_\_\_\_

**Exp. Date (MM/YY):** \_\_\_\_\_ **Security Code:** \_\_\_\_\_

*For Visa / MC: 3 digit code on back  
For AMEX: 4 digit code on front*

**Ordering Information**

QTY	PART No.	DESCRIPTION	UNIT PRICE	AMOUNT
				\$ -
			SUBTOTAL	\$ -
			MA TAX RATE	5.00%
			SALES TAX	-
			SHIPPING & HANDLING	
			<b>TOTAL</b>	<b>\$ -</b>

**Shipping Method (check one):**

UPS  
 FEDEX

**Shipping Urgency (check one):**

Overnight  
 2nd Day  
 Ground

**Shipping Instructions (check one):**

PP+Add \*  
 Collect

If Collect is selected, Enter  
UPS or FEDEX No. here: \_\_\_\_\_

\* SHIPPING CHARGES WILL BE ADDED TO INVOICE IF "PP+ADD" IS SELECTED

**THANK YOU FOR YOUR BUSINESS**