

Fax Order Form to: 1-800-965-4950

1. Product Information

| Quantity | Item Number | Description | Price Each | Total |
|--|-------------|-------------|------------|-------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Shipping Charges are based on this number → If your subtotal is \$0.01 to \$9.99 add \$5.85 for shipping \$10.00 to \$49.99 add \$8.95 for shipping \$50.00 to \$99.99 add \$12.85 for shipping \$100.00 or more FREE SHIPPING | | | Sub-Total | |
| | | | Shipping | |
| | | | Total | |

Shipping charges are based on delivery within the 48 states, please contact us for shipping charges to other areas.

2. Shipping Information

Company Name: _____

ATTN: _____

Street: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: () _____

e-mail: _____ @ _____

3. Payment Information

Credit Card Number

□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

Expiration Date

□ □ / □ □

Name (as it appears on card) _____

Card Billing Address: _____

We Accept:

MasterCard VISA

American Express

Discover Check

City: _____ **State:** _____ **Zip Code:** _____