

## MAIL/FAX FRIENDLY ORDER FORM

PLEASE MAKE A COPY OF THIS ORDER FORM. USE COPY TO  
PLACE YOUR ORDER. SAVE THE ORIGINAL FORM FOR FUTURE USE

<b>BILL TO/SHIP TO:</b> (if same location)	<b>SHIP TO:</b>
Customer Number (If Known)	Name
Name	Department
Department	Company/School
Company/School	Address
Address	City/State/Zip <span style="float: right;">Country</span>
City/State/Zip <span style="float: right;">Country</span>	Phone Number
Phone Number	FAX Number

### METHOD OF PAYMENT

**PURCHASE ORDER NO.** \_\_\_\_\_ (Net 30)

**SHIP VIA** \_\_\_\_\_

- Visa  
  Mastercard  
  American Express  
  C.O.D. – Company Check  
  Money Order  
  Certified Check  
Upon Credit Approval

***SORRY — WE CANNOT ACCEPT PERSONAL CHECKS***

**CREDIT CARD NO.** \_\_\_\_\_ **EXP. DATE** \_\_\_\_\_

QTY.	PART NO.	DESCRIPTION OF ITEM	COST EA.	EXT. PRICE

MINIMUM ORDER — \$20.00 SHIPPING EXTRA  <i>Thank You For Your Order We Appreciate Your Business</i>	Sub Total 7% NJ Sales Tax <small>(NJ Residents Only)</small> Shipping <hr/> <b>TOTAL OF ORDER</b>
FOR COMPANY USE ONLY _____	_____

ELECTRONIX EXPRESS	1-800-972-2225 FAX: 1-732-381-1006 1-732-381-1572	IN NEW JERSEY: 1-732-381-8020 900 HART ST. RAHWAY, NJ 07065
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