



Credit cards accepted:



**Instructions: TAB or Mouse through fields, key in information, PRINT COMPLETED FORM, SIGN, and FAX to 856.809.2601. Product Availability is dependent upon demand and existing orders.**

## Order Form

Is this a revision? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Purchase Order #	Terms: <input type="checkbox"/> N30 <input type="checkbox"/> <a href="#">Credit Card</a> <input type="checkbox"/> Prepay
Contact Name:	E-mail Address:
Phone #:	Fax#:

### 1. YOUR ACCOUNT INFORMATION

Bill to Name:		Ship to Name:	
Company Name:		Company Name:	
Street:		Street:	
City, State, Postal Code		City, State, Postal Code	
Country		Country	
Phone:	Fax:	Phone:	Fax:

### 2. ORDER INFORMATION – ALL ORDERS ARE CONSIDERED FINAL; please see our Terms & Conditions at [www.technobox.com/Terms-and-Conditions.html](http://www.technobox.com/Terms-and-Conditions.html)

Technobox Part#:	Quantity:	Description:	Price Each:
Your Company's P/N (if applicable):	Desired Delivery Date:	Advanced Shipments <input type="checkbox"/> Yes <input type="checkbox"/> No	Line Item Total:
Technobox Part#:	Quantity:	Description:	Price Each:
Your Company's P/N (if applicable):	Desired Delivery Date:	Advanced Shipments <input type="checkbox"/> Yes <input type="checkbox"/> No	Line Item Total:
Technobox Part#:	Quantity:	Description:	Price Each:
Your Company's P/N (if applicable):	Desired Delivery Date:	Advanced Shipments <input type="checkbox"/> Yes <input type="checkbox"/> No	Line Item Total:
* <a href="#">NJ Certificates of Tax Exemption</a>		Taxable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Order Total:



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## Order Form (Continued)

- Requests shipping insurance.
- Declines shipping insurance. Customer assumes all responsibility for lost items or damages that occurs during transit. Customer is responsible for replacement costs.

(Please see our [Terms & Conditions](http://www.technobox.com/terms-and-conditions.htm) at <http://www.technobox.com/terms-and-conditions.htm>)

### 3a. SHIPPING INFORMATION – PREPAY & ADD

<input type="checkbox"/> Standard: UPS	<input type="checkbox"/> FedEx Express	<input type="checkbox"/> DHL
<input type="checkbox"/> Other		<input type="checkbox"/> Next Day Air <input type="checkbox"/> Ground <input type="checkbox"/> 2nd Day Air <input type="checkbox"/>

### 3b. SHIPPING INFORMATION – COLLECT

<input type="checkbox"/> UPS    Postal Code Acct#	<input type="checkbox"/> FedEx Acct#	<input type="checkbox"/> DHL Acct#
<input type="checkbox"/> Other Acct#	Phone#	<input type="checkbox"/> Next Day Air <input type="checkbox"/> Ground <input type="checkbox"/> 2nd Day Air <input type="checkbox"/>

### 4. CREDIT CARD INFORMATION

Credit Card                       VISA                       MasterCard                       AMEX

Account Number \_\_\_\_\_ Sec. # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Card Holder's Name \_\_\_\_\_

Authorized User's Name (Print) \_\_\_\_\_

Authorized User's Signature \_\_\_\_\_

I understand and accept Technobox, Inc. Terms & Conditions including NC/NR, as listed on [www.technobox.com/terms-and-conditions.html](http://www.technobox.com/terms-and-conditions.html)

\* For NJ Certificates of Exemption, see [www.state.nj.us/treasury/taxation/pdf/other\\_forms/sales/st3nr.pdf](http://www.state.nj.us/treasury/taxation/pdf/other_forms/sales/st3nr.pdf)

A copy of the invoice/transaction record will be mailed via US Postal Service

### 5. SPECIAL INSTRUCTIONS (e.g. DPAS Rating & Contract #)

Customer Signature	Date