



Property of Embi Tec

Sales Order Form

Initials: _____

Source: _____

End User's Name:	Phone No.	<input type="checkbox"/> Fed Ex P1
Buyer's Name	Phone No.	<input type="checkbox"/> UPS Red
Shipping Information		Billing Information
Attn:	Name:	
Institution:	Institution:	
Department:	Department:	
Street Address:	Street Address:	
Bldg. / Rm.:	Bldg. / Rm.:	
City:	City:	
State, Zip:	State, Zip:	
<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> VISA	<input type="checkbox"/> AMERICAN EXPRESS
PO Number:	Credit Card #	
Quote Ref. Number:	Expiration Date:	
Shipping Date Promised:	Name:	
Date Needed By:	Address: <input type="checkbox"/> Same as Billing	
Shipping Method: Ground / Std / 2 Day / Saver	Zip Code:	

QTY	Catalog Number	Description	List Price	Ext. Price
		Shipping Charge:		
		Total		

Copies To: ECE RC KKG DH PAS MMM