

**BILL TO:**

**SHIP TO:**

|  |  |
|--|--|
|  |  |
|--|--|

| PURCHASE ORDER NO.  | UPS GROUND | UPS RED     | UPS BLUE | UPS ORANGE | TRUCK | WILL CALL | ORDER DATE   | DATE REQ. |
|---|------------|-------------|----------|------------|-------|-----------|--------------|-----------|
|   |            |             |          |            |       |           |              |           |
| QTY.  | PART NO.   | DESCRIPTION |          |            |       |           | PRICE EACH   | TOTAL     |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
|   |            |             |          |            |       |           |              |           |
| <b>Note: Freight charges will be applied once order has been processed.</b> |            |             |          |            |       |           | <b>TOTAL</b> |           |

ORDERED BY: \_\_\_\_\_

**CREDIT CARD TYPE**

**Payment Options:**  
(Please select payment type)

- |                  |            |
|------------------|------------|
| Visa             | Mastercard |
| American Express | Discover   |

NET 30 (Existing Customers Only)

C.O.D.

**CREDIT CARD**  
(If paying by credit card, please complete the right section entirely.)

|                 |  |
|-----------------|--|
| CARD NUMBER     |  |
| EXPIRATION DATE |  |
| CARDHOLDER NAME |  |