



Customer Contact and Order Form

Customer Information

Company/Institute:			Date:
Contact Name:			Phone:
Title:			Fax:
Address:			Email:
City:	State:	Zip:	<input type="checkbox"/> E-mail confirmation requested
Country:	Would you like to receive product updates by email?		<input type="checkbox"/> New Customer How did you hear about us?

Billing & Shipping Information (If different from above)

Bill to:			Ship to:		
Name:			Name:		
Address:			Address:		
City:	State:	Zip:	City:	State:	Zip

Payment Options

<input type="checkbox"/> VISA	Cardholders Name (Exactly as it appears on card):	Expiration Date (MM/DD/YY):
<input type="checkbox"/> MasterCard		
	Card Number:	Security Code:
<input type="checkbox"/> Invoice 30 days Net	PO Number:	Authorizing signature:

Shipping Information

All products orders are shipped on dry ice or gel packs and will be shipped via FedEx (domestic), or World Couriers or FedEx Priority (international). Orders placed Monday or Tuesday will be shipped out on Wednesday. Orders placed Wednesday - Sunday will be shipped out on Monday.	
Alternate ship date if requested:	

Order

Item Number	Product	Quantity	Price Each	Total
			Handling Fee	\$15 (domestic) or \$25 (international)
			Subtotal	
Shipping & applicable taxes will be calculated at the time of shipment				

Internal use only: Shipment date: _____
Follow-up date: _____