**Customer Contact and Order Form**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Contact Information** | | | | | | | | | | | | | | | | | | | | | | |
| Company/Institute: | | | |  | | | | | | | | | | Date: | | |  | | | | | |
| Contact Name: | | | |  | | | | | | | | | | Phone: | | |  | | | | | |
| Title: | | | |  | | | | | | | | | | Fax: | | |  | | | | | |
| Address: | | | |  | | | | | | | | | | Email: | | |  | | | | | |
| City: | | | |  | | | | | | | | | | Country: | | |  | | | | | |
| State: | | | |  | | | | Zip: | |  | | | | **E-mail confirmation requested?** Yes / No | | | | | | | | |
| **How did you hear about us?** | | | | | | | |  | | | | | | **New Customer?** Yes / No | | | | | | | | |
| **Billing & Shipping Information** (If different from above) | | | | | | | | | | | | | | | | | | | | | | |
| Bill to: |  | | | | | | | | | | | Ship to: | | |  | | | | | | | |
| Name: |  | | | | | | | | | | | Name: | | |  | | | | | | | |
| Address: |  | | | | | | | | | | | Address: | | |  | | | | | | | |
| City: |  | | | | | | | | | | | City: | | |  | | | | | | | |
| State: |  | | | | | Zip: | | |  | | | State: | | |  | | | | | Zip |  | |
| **Payment Options** | | | | | | | | | | | | | | | | | | | | | | |
| **\_\_\_\_\_VISA** | | | | | Cardholders Name: | | | | | |  | | | | | | | Expiration Date: | | | |  |
| **\_\_\_\_\_MasterCard** | | | | | Card Number: | | | | | |  | | | | | | | Security Code: | | | |  |
| **\_\_\_\_\_Invoice 30 days Net** | | | | | PO Number: | | | | | |  | | | | | | | | | | | |
| Authorizing signature: | | | | |  | | | | | | | | | | | | | | | | | |
| **Shipping Information** | | | | | | | | | | | | | | | | | | | | | | |
| Domestic Orders | | Shipped via FedEx on dry ice or gel packs. Orders placed Monday or Tuesday will be shipped out on Wednesday. Orders placed Wednesday - Sunday will be shipped out on Monday. | | | | | | | | | | | | | | | | | | | | |
| International Orders | | All orders will be shipped via FedEx or Biocair on dry ice or gel packs on Monday. | | | | | | | | | | | | | | | | | | | | |
| Alternate ship date if requested: | | | | | | |  | | | | | | | | | | | | | | | |
| **Order** | | | | | | | | | | | | | | | | | | | | | | |
| Item Number | | | Product | | | | | | | | | | Quantity | | | Price Each | | | Total | | | |
|  | | |  | | | | | | | | | |  | | |  | | |  | | | |
|  | | |  | | | | | | | | | |  | | |  | | |  | | | |
|  | | |  | | | | | | | | | |  | | |  | | |  | | | |
| **Subtotal\*** | | | | | | | | | | | | | | | | | | |  | | | |

\*Shipping and applicable taxes will be calculated at the time of shipment