BANTAM INSTRUMENTS ORDER FORM

Fax to (408) 904-5221

SHIP TO:				BILL TO:			
Name				Name			
Company				Company			
Address				Address	Address		
Address				Address			
City State Zip				City	State Zip		
Telephone				Telephone			
Item Quantity	Part Number		Description		Price	Extended	
1							
2							
3							
4							
5							
	SHIPPING MET	HOD	Si	SUB-TOTAL FOR GOODS Sales Tax – California Orders Only			
UPS 2nd	Day Air U	PS Overnight		SHIPPING CHARGES		TO BE ADDED	
Other (Please Specify)			TOTA	TOTAL PRIOR TO SHIPPING CHARGES			
		P	AYMENT MET	HOD			
CC	OMPANY PURCHA	SE ORDER		CREDIT CARD			
Purchase Order	Number		••	• • • • •		• • • •	
Purchasing Ag	ent		Card Nu	Number			
Signature			Expirati	ion Date/ VISA MasterCard			
Phone Number			Name or	on Card:			
Fax Number			Signatur	re:			
Terms Net 30 a 94086.	fter approval of cred	lit. FOB Sunnyvale, C		edit Card Billing Address ZIP Code			