PA	RTS Order	Form (US	S 48 Custom	ners)	1-1-24						
Person's Name Placing This Order		Relationship to the Company or Organization									
Cell Phone:		Email	:								
Note: We offer discounted "factory direct" pricing to customers with the expectation that payment is received on time. If your payment is late you will forfeit (lose) all special pricing or discounts, including factory direct pricing, and MSRP prices will apply, plus interest will be charged. You will receive one invoice. We do not send statements. It is not our responsibility to remind you to pay on time. Payments due 30 Days from Ship Date.											
	g@midlands.net Fax ss Purchase Orders & Che ny 515 - 6th Ave.		Authorization Accepted and Authorized by (signature) date								
Bill to: Company or Organization Name that the invoice should be addressed to:											
t. Address or P.O. Box Send Invoice To: Who's Attn. to send Bill To:											
City			Email for person above:								
State		Zip	Business Phone for person above:		Fax						
Iowa Customers must Provide Proof of "Tax Exempt status or they must pay appropriate tax. Please include this with order.			Cell Phone for person above:								
Should the Invoice be m	nailed, or emailed, or both?	Check both if desired.	· Mail I	nvoice Email	Invoice						
Method of Payment			eck One	VISA or MasterCard							
How will you pay? Check payments due 30 Days from Ship Date. If you choose to pay with credit card this info must be given at time of order and not after 30 days. We will charge your card on the ship date or soon after.											
Credit Card Info. VISA											
Person's Name EXACTLY as it appears on the card:					iration Date h Year						
Billing Address for Card (where card billing goes to)					CCV: 3 Digit Security Code back of card.						
City	<u>'</u>		State	Zip	Invoice No. (if applicable)						
Check here to Verify. Required. I verify that I have checked with my Bank or Credit Card Company to make sure there are Sufficient Funds and there are NO Restrictions on this card! Often when a customer wants to pay with credit card they either don't have sufficient funds to											
cover the purchase or they have restrictions on how much can be charged to their card (they might not even know the restriction is there). If you choose to pay with credit card we expect you to make sure the funds are there, and, that restrictions are removed or that a restriction is high enough to allow for the purchase dollar amount of your order. Required: Authorized Cardholder Signature											



PART	S (S Orders Ship UPS					Shipping Info.			
SHIP		hip to addreded is (Che								
	ny, Organiza idual Name	tion,								
Physical Address (must be a street address)										
City			State				Zip			
Attn. to:			Email							
Cell Phone					Business Ph	ess Phone				
		vi If you do r	ts for all mad sit our web not see the p List belo	site art listed th	www.Heyin nen please ir	gCompa equire by	ny.com email or ph	·		
Qty.	Part No. Pa			Part De	escription			Cost Ea.	Total	
	E		rbheying x to: 712-				Tot	al		



Shpg. Cost is Extra