



# Order Form

## Billing Address

Company:

Address:

State/Province:

Zip/Postal Code:

Phone:

Fax:

Contact Name:

## Shipping Address

Same as Billing

Company:

Address:

State/Province:

Zip/Postal Code:

Phone:

Fax:

Contact Name:

P.O. # *	Quote #	Sales Rep	Rush Order (Y/N)	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

QTY	Item # **	Price
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Contact Name:**

**Phone:**

**Fax:**

**E-Mail:**

**Card Number:**

**Name On Card:**

**Exp. Date:**

**CVV:**

\* If you would like to use a credit card and prefer not to submit the information via fax or email, please indicate you will be using a credit card as the payment option and we can call you once we receive your order.

\*\* We would like to save you time and money so if you are unsure of whether the product(s) you are ordering are right for your application, please call us at 858-455-0643, before submitting the order!

**Please submit form to: [orders@vp-scientific.com](mailto:orders@vp-scientific.com)**

**Or**

**Fax to: (858) 455-0703**