

Order to Ultra Tec for Faceting Products

Print
Me
Out

MY INFORMATION

Name		Telephone	
Ultra Tec Rep. (if applicable)		Fax	
Purchase Order (if applicable)		e-mail	

BILL TO Address

SHIP TO Address (if different from bill to)

CREDIT CARD INFORMATION (Note: Card is not charged until time of shipment)

My Card # is as follows: _____

Expiry Date: mth / year

Type of Card (Circle one): **MC / VISA**

Line Item	Qty	Part #	Description	Item Price (US\$)	Extended Price (US\$)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
			Packing & Ground Shipment (Air shipment on international orders)	Add at Cost	Add at Cost

Please process my order.

Signed _____

Once form is complete, **FAX to 1.714.542.0627** -- Questions to info@ultratec-facet.com