FAX/MAIL ORDER FORM

SHIPPING CHARGES - Please call for freight quote.

ITEMS WILL BE SHIPPED TO ADDRESS BELOW UNLESS "SHIP TO" ADDRESS IS INDICATED AT RIGHT.

PURCHASED BY: (BILLING ADDRESS FOR CREDIT CARD)

NAME_____

ADDRESS_____

CITY_____

STATE_____ ZIP_____

DAY PHONE ( )_____

SHIP TO:

NAME_____

ADDRESS_____ APT #_____
(Street # for UPS No P.O. Boxes)

CITY_____

STATE_____ ZIP_____

EVENING PHONE ( )_____

STOCK No.	PRODUCT NAME	COLOR	SIZE	QUANTITY	UNIT PRICE	TOTAL PRICE

CUSTOMER SERVICE/
PHONE ORDERS
1/408/267/1446

FAX ORDERS
1/408/265/7290

DATE NEEDED BY:

_____

Additional Comments

For Office Use Only

Date Rec._____

Rec. By_____

Date Filled_____

Filled By_____

INVOICE #_____

Sold By_____

Date Shipped_____

Freight_____

P.O. #_____

Back Order Attached____

Verified_____

Operator_____

Date_____

Issuing Bank_____

PAYMENT METHOD

- ☐ AMERICAN EXPRESS
- ☐ MASTERCARD
- ☐ VISA
- ☐ CHECK
- ☐ MONEY ORDER
- ☐ BANK WIRE
- ☐ PURCHASE ORDER ATTACHED

Dance Equipment International

P.O. Box 6331 • San Jose, CA 95150

www.danceequipment.com

NOTE: Purchase orders accepted from City, State, and Federal Government institutions and Public School Systems only. NET 15 DAYS FROM INVOICE DATE.

CREDIT CARD NUMBER (All digits please)

EXPIRATION DATE/SECURITY CODE

SIGNATURE OF AUTHORIZED BUYER_____

I hereby attest that I am the authorized user of the card identified above and authorize the issuer to pay the amount shown as total upon presentation. I promise to pay such total (together with any other charges due thereon) subject to and in accordance with the Agreement governing the use of this card.

SUBTOTAL	
DISCOUNT OR SURCHARGE	
SUBTOTAL	
CALL FOR SHIPPING FREIGHT QUOTE	
SUBTOTAL	
SALES TAX CA Residents 9.25%	
TOTAL ORDER U.S. CURRENCY	

THANK YOU
FOR YOUR ORDER