

SUTTER ORDER FORM

Download fillable PDF, Complete Form, FAX or Email Your Order

**ORDER INFORMATION (For Orders Under \$2,000)****Items Requested**

Quantity	Product No.	Description (optional)	Unit Price	Total
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Shipping charges will be added to your total. Sale tax for California customers only.

Total

CUSTOMER INFORMATION**Bill To**

Institution Name

Department Name

Room Number

Contact Name

Address Line 1

Address Line 2

City State/Prov State

Country Zip Zip

Phone

Fax

Email

Ship To

Institution Name

Department Name

Room Number

Contact Name

Address Line 1

Address Line 2

City State/Prov State

Country Zip Zip

Phone

Fax

Email

PAYMENT METHOD**Purchase Order No**

Please attach Purchase Order

Credit Card Type Master Card Visa Amex
 Call me for credit card info

Credit Card No.

Expiration Date CVC CVC

Cardholder's Name

Please do not send credit card info via email

Signature

Must have signature to process

SHIPPING INFORMATION

Ship Via Bestway *Two to three business days in the U.S.*

Collect Overnight *

FedEx

UPS

Account No.

Service

Date needed by

** Additional charges will apply*

