

ORDER FORM



CUSTOMER INFORMATION

Customer Account Number: _____
Purchase Order Number: _____
Federal Tax ID Number: _____

BILLING INFORMATION

Bill to Name: _____
Company: _____
Department: _____
Address: _____
City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____
Phone: _____ Fax: _____

SHIPPING INFORMATION [if different than billing]

NOTE: UPS does not ship to P.O. Boxes

Company: _____
Department: _____
Department Contact Name: _____
Address: _____
City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____
Phone: _____ Fax: _____

Shipping Instructions: Ground 3 Day Select 2nd Day Next Day

Would you like this order to be added as a Standing Order? Yes No

Standing Orders are automatically processed on the 20th of each month and shipped in time to arrive by the 1st of the month. For more information about Standing Orders, contact Customer Service.

ORDER INFORMATION

Ordered By: _____
E-mail Address: _____
Special Instructions: _____

PAYMENT METHOD

Check [payable to Rhythmink International, LLC]

Invoice

Preferred method to receive invoice: E-mail _____

Fax _____

Mail to billing address

Credit Card

Visa MasterCard Discover American Express

Credit Card Number: _____ Expiration Date: _____ EIC: _____

Card Holder's Name: _____ Signature: _____

HOW DID YOU HEAR ABOUT US?

If this is your first time ordering from Rhythmink or you're trying a new product, we'd like to know: What prompted your order?

- Trade Show - Which trade show? _____
- Referral - Who referred you? _____
- Advertisement - What publication? _____
- Other - Please specify. _____

