CALIFORNIA SAFETY & CLEANROOM

ORDER FORM

Company: _____ **Ship to Address:** _____

Address: _____ _____

_____ _____

Name: _____ **PHONE** _____**Date:** _____

FAX ORDER FORM TO: 408-988-6623 OR CALL US AT 408-727-8530

PART #	Item Description	QUANTITY	PRICE	UM	TOTAL
			TAX		
			TOTAL		

METHOD OF PAYMENT

PO#_____ **COD**_____

CREDIT CARD **VISA** _____ **MASTERCARD** _____ **AMEX** _____

CREDIT CARD#_____ **CARD EXPIRES**_____

PRINT NAME_____ **DEPARTMENT**_____

AUTHORIZED SIGNATURE_____

TERMS: NET 30 **FOB: FACTORY**

Special instructions: _____

*** A COMPLETED CREDIT APPLICATION MUST ACCOMPANY AN ORDER FOR ANY NEW ACCOUNT PLACING A PO.**