

CREDIT CARD ORDER FORM (*indicates required Items)
To place an order please fax or email your completed form to:
Email: sales@turnerdesigns.com
Fax: 408-749-0998

INVOICE MAILING ADDRESS ("PA	AID" INVOICE MAILED HERE)	PH	YSICA	AL SHIP TO ADDRESS (PO BOXES NOT ACCEPTED)	
*Company Name:		*Company Name:				
*Address:		*Addres	*Address:			
*City:	*State:	*City:	*City:		*State:	
*Postal Code:	*Country:	*Postal (Code:	:	*Country:	
*Buyer's Name:		*Contac	*Contact Name:			
*Buyer's Phone Number:		*Phone	*Phone Number:			
*Buyer's Email Address:			*Please indicate type of address: Business Residential			
		ARD INFORM	OITAN	N		
*Name as it appears on the credit card:			1 to			
*Credit Card Number (Visa or MasterCard only)			*Expiration Date: / (mm/yy)		*3-digit security code from the back of the card:	
*Card holder's phone number:			*Card holder's email address:			
*Card billing address:		•				
*City: *State: *F		*Postal C	Postal Code:		*Country:	
I'd prefer someone call me for credit card details		Best time	Best time to call:		Time Zone:	
PLEASE INDICATE THE ITEMS YOU WOULD LIKE TO ORDER If you received a quotation please attach in lieu of inputting each item below						
Part #	Description	Qty		Unit price (USD)	Line item total	
				Out Tatal		
Please indicate any special instructions (i.e. preferred method of		od of shipn	nent. v	Sub-Total vour internal referen	ce number):	
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Shipping and handling charges will be prepaid and added to your order. Shipments will be made via the most economical method possible, unless otherwise specified.			3	FOR INTERNAL USE ONLY		
Item numbers 10-850 and 10-950 are perishable and shipped on ice. Shipments for				ORDER APPROVAL		
these two items will be processed via overnight service and only accepted for ship to addresses within the Continental U.S.A. The shipping and handling charge for each of				SALES	DATE	
these items will not exceed \$115 each.						
Sales tax will be added where applicable. If you are exempt from taxes please include resale or exemption certificate with your order.				FINANCE	DATE	
Minimum Orders: There is a \$50 minimum order charge.				OPERATIONS	DATE	
Returns Policy: All returns must have prior written Return Material Authorization (RMA). To request an RMA please <u>contact us</u> . Returns requested within 45 days or receipt of product will be subject to a 20% restocking fee plus customization fee, if applicable. Returns requested after 45 days and before 90 days of receipt of product be subject to a 30% restocking fee plus customization fee, if applicable. No Returns after 90 days will be accepted. RMAs are not issued for consumables.			will	CUST KEY:		
Cancellations: Requests for cancellation or for suspension of production must be in writing and referred to our office. Cancellations are subject to fees of 10% of order value plus customization fee, if applicable.				Order Entry Use Only: Entered by: Date:		