ORDER FORM

Name: _____

Company: _____

Address: _____

_____

Tel: (Home) _____ (Cell) _____

(Bus.) _____ (Fax) _____

(E-mail) _____

Ship To: _____

_____

_____

Ship Via: _____

Order Date: _____

Date Needed: _____

☐ New Order ☐ Reorder

Selection #: _____

Referred By: _____

Master Format: _____

CSR: _____ Rep: _____

Ship audio and design proofs to:

_____

_____

_____

QUANTITY	PACKAGE DESCRIPTION	UNIT PRICE	TOTAL

o Visa o Mastercard o _____ Exp. Date: _____

Card #: _____

Name: _____

Billing address if different: _____

_____

_____

Please note that all manufacturing is considered complete if final shipment is plus or minus 10% of the amount ordered. Client will be credited for under-run or charged for over-run. All prices are plus freight and handling.

Signing of this order acknowledges that you have read and agree to Trutone's "Terms & Conditions".

_____ _____

SIGNATURE DATE

Total Order: $ _____

Sales Tax ____ % _____

Sub Total: _____

1st Deposit (60%): _____

Vinyl Records (80%): _____

Balance: _____

2nd Deposit (20%): _____

Balance: _____

Freight: _____

*Final Balance: $ _____

(*Only cash, certified check or credit card will be accepted as final payment.)

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