



RFQ# _____ Date _____

Partial Shipment Okay?

____ Yes ____ No

Product Order Form

PURCHASE ORDER NO.:		CONTACT NAME:	
EMAIL ADDRESS:		SALES REP.:	
BILLING ADDRESS:			
CORPORATION NAME:			
ADDRESS:		ADDRESS2:	
CITY:		STATE:	
POSTAL CODE:		COUNTRY:	
PHONE NO.:		FAX NO.:	
SHIPPING ADDRESS (If Different Than Bill To Address – Cannot Deliver to PO BOXES)			
CORPORATION NAME:			
ADDRESS:		ADDRESS2:	
CITY:		STATE:	
POSTAL CODE:		COUNTRY:	
PHONE NO.:		FAX NO.:	
CONTACT:			

PART #	DESCRIPTION	QTY.	UNIT PRICE	TOTAL PRICE
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			TAX	\$

REQUESTED DATE: _____ TOTAL AMOUNT DUE \$ _____

The order is subject to VoxTechnologies standard terms and conditions.

Credit Card
 Prepay
 Terms

Faxes orders to: _____ VISA _____ MasterCard _____ American Express

Attn: Sales Dept.
Fax: 1-972-234-4295

Valid Expiration Date mo/yr ____/____

Credit Card Number: _____

US Customers

Prepays make check payable to:

VoxTechnologies
1180 Commerce Dr.
Richardson, TX 75081

VoxTechnologies
1180 Commerce Dr.
Richardson, TX 75081

Phone: 1-972-234-4343

Customers CVV2/CVC2/CID Numbers _____ **This is a security code that is present on credit cards used to prevent fraud. MC/VISA – 3 Digits on back, Amer. Exp. – 4 Digits on front**

Name on Card _____

International Customers

Special instructions for shipping: _____

Wire transfer to:

Bank of America
551 S. Plano Rd.
Richardson, TX 75081

SHIPPING METHOD: _____ STANDARD (5-7 days)
 _____ 3-DAYS _____ 2-DAYS _____ OVERNIGHT
 Shipping cost will be added and billed to your credit card.

USE MY OWN FREIGHT SERVICE
SHIPPER NAME AND ACCOUNT #: _____

Routing #: 026009593
Account #: 488024538413
Swift Code: BOFAUS3N
Account Name:
Relevant Technologies Corp.
1180 Commerce Dr.
Richardson, TX 75081