



ORDER FORM

Fill form in completely and FAX to 1.931.454.2306

Date ___/___/___ Your Name _____ Your Email _____

Your Phone Number _____ Your Fax Number _____

Table with 2 main columns: Cardholder/Billing address and Shipping address. Sub-headers include Name, Company, Address, City, State, Zip / PC, Country, Tel, Fax, and PO# / Note.

General Information, Terms and Conditions

We will send confirmation of order and shipment within 1 business day after receiving your order. Prices are in USA dollars, F.O.B. Tullahoma, TN, USA. Minimum order US\$25.00. Our General Conditions of Sale apply. Freight cost will be added to your order. Unless otherwise specified, we will ship using the following method: UPS Ground for US orders or FEDEX International Priority for international orders. Return Policy: Any item may be returned to us for any reason, for a full refund, excluding freight, within 14 days of invoice date. Returns may be refused if merchandise is not in an original and resalable condition.

Table with 4 columns: Qty., Description, Price, Amount. Includes item 'RFID Demokit-1' with price 129.00. Includes a row for Shipping Method and Freight. Includes a TOTAL US\$ row.

Card Type VISA___ MASTERCARD___ AmEx___

Credit Card Number [Grid of 16 boxes]

Card Expiration Date ___/___

Cardholder Signature X _____ Cardholder Name _____

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.

Thank you very much for your order!

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