

ORDER FORM

Name: _____
Attention: _____
Address: _____

Phone: (_____) _____

ILLINOIS - ISAT:

	<u>Quantity</u>	<u>Unit Price</u>	<u>Total</u>
Single	_____	@\$34.95	\$ _____
Lab Pack of 5	_____	@\$139.95	\$ _____
Site License for 30	_____	@\$549.00	\$ _____

Ohio residents add 7% sales tax or provide tax exempt documentation. **TAX:** \$ _____

Shipping & Handling:

1-4 CDs	\$5.00	
5-15 CDs	\$10.00	
16+ CDs	\$15.00	S&H: \$ _____

MAIL TO:

Photonics Graphics
2244 Park Avenue
Cincinnati, OH 45206
888-548-4440 x107

TOTAL: \$ _____

CHECK ENCLOSED

PURCHASE ORDER INCLUDED # _____

FAX TO:

Photonics Graphics
513-487-4553

