



Web Site Order Form

SHIP TO INFORMATION: (Completed By Customer)
COMPANY NAME:
ATTENTION OF:
ADDRESS:
CITY / STATE / ZIP:
CONTACT NUMBER:
CONTACT FAX:

SOLD TO INFORMATION: (Completed By Customer)
COMPANY NAME:
ATTENTION OF:
ADDRESS:
CITY / STATE / ZIP:
CONTACT NUMBER:
CONTACT FAX:

ORDER PLACED BY:
ORDER DATE:
PURCHASE ORDER NUMBER:

PAYMENT TERMS:
SHIPPING INSTRUCTIONS:
REQUESTED SHIP DATE:

PRODUCT INFORMATION: (Completed By Customer)

LN	QUANTITY	SHURE ITEM #	DESCRIPTION	UNIT COST	EXTENDED COST
				\$	\$

ORDER CONFIRMATION:

(Completed By Shure and returned to Customer/Originator)

SHURE SALES CONTACT: _____

CONTACT NUMBER: _____

MERCHANDISE TOTAL:	\$
APPLICABLE CITY / STATE SALES TAXES:	\$
ESTIMATED SHIPPING CHARGES (NOTE):	\$
TOTAL ORDER AMOUNT DUE:	\$

PLEASE AUTHORIZE THIS ORDER AS CONFIRMED BY SHURE BY SIGNING BELOW AND FAXING / RETURNING THE ORDER TO SALES AT 636.390.7171.

 AUTHORIZED SIGNATURE

 PRINTED NAME AND TITLE

 DATE AUTHORIZED

(NOTE: ALL SHIPMENTS ARE FOB SHURE MANUFACTURING CORPORATION, 1901 WEST MAIN STREET, WASHINGTON, MO 63090)