



PRODUCT ORDER FORM

Please include payment with your order.

Shipping Address:

Name _____ Profession _____
Company Name _____
Company Address _____
Company Address 2 _____
City _____ County _____
State _____ Zip _____
Phone _____
E-mail address _____

Thank you for your order!

Please fax your order (and tax-exempt certificate, if applicable) to:

1-800-554-9775

Or mail your order (and tax-exempt certificate, if applicable) to:

PESI, Inc.
Attn: Order Entry
PO BOX 1000
Eau Claire, WI 54702

Please note: Confirmation/receipts are sent only via e-mail.

Billing Address (if different from above):

Company/Name _____
Company Address _____
City _____ County _____
State _____ Zip _____

For office use only:

Check #: _____

Product Order:

Qty	Item Number	Title	Price	Total

Payment Information:

Check ☐ Master Card ☐ Visa ☐ Am Express ☐ Discover ☐

Card Number _____

Exp Date _____ V Code _____

Name on Card _____

Signature _____

Tax-Exempt ID# (if applicable): _____

Mail Code: _____

Product total \$ _____

*Shipping _____

Subtotal _____

**Tax _____

TOTAL \$ _____

*Domestic shipping is \$6.95 first item + \$2.00 each add'l item.

**AL, AZ, AR, CA, CO, CT, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NV, NJ, NM, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA WASHINGTON DC, WV, WI, WY residents add applicable state and local taxes.

If you are a tax-exempt organization, please provide us with your tax-exempt ID # and attach a copy of your tax-exempt certificate with this order.

*If you have any questions, are ordering more than 4 items, or are outside the U.S., please call our Customer Service department at 1-800-844-8260



ADDITIONAL PARTICIPANTS

[illegible]