

EMAIL / FAX / MAIL - ORDER FORM

INVOICE TO:

NAME _____

ADDRESS _____

CITY _____ PROV/STATE _____ CODE _____

TELEPHONE _____ FAX _____

E-MAIL ADDRESS _____

SHIP TO (IF DIFFERENT):

NAME _____

ADDRESS _____

CITY _____ PROV/STATE _____ CODE _____

TELEPHONE _____ FAX _____

E-MAIL ADDRESS _____

PRODUCT CODE	QTY.	DESCRIPTION (Include Unit Size)	UNIT PRICE	TOTAL

Minimum Order is \$50.00. Handling charge of \$5.00 will be applied to orders with a total value of goods under \$50.00

Total Merchandise _____

Shipping _____

G.S.T. (If Applicable) _____

P.S.T. (BC Only) _____

H.S.T. (If Applicable) _____

Total Due _____

Tax Exemption # _____

↑
To be
determined
↓

<input type="checkbox"/> Payment Enclosed \$ _____
<input type="checkbox"/> Net 30 Purchase Order No. _____
Charge to my <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
Card Number _____
Exp. Date _____ Name _____
3 Digit Security Code _____
Signature _____

ORDER LINE: (800) 355-8551
TELEPHONE: (604) 543-7504
FAX (24 HRS): (604) 543-7604
E-MAIL: sales@dynamicaqua.com

ORDER Date: _____
DYNAMIC AQUA-SUPPLY LTD.
#112 - 8299 129TH STREET,
SURREY B.C., CANADA V3W 0A6