DOUGLAS TECHNOLOGIES GROUP INCORPORATED

SINCE 1981

ORDER FORM

DATE _____

CUSTOMER NAME & ADDRESS:

_____

_____

_____

_____

P.O.#_____

SHIP TO (WRITE SAME IF SAME AS BILL TO)

_____

_____

_____

PHONE: ( ) _____ - _____ ext. _____ FAX: ( ) _____ - _____

email: _____

PAYMENT: ☐ VISA ☐ MASTERCARD ☐ AMEX

CREDIT CARD#: _____ CODE: _____ EXP: _____

SERVICE: ☐ FEDEX GROUND ☐ NEXT DAY AIR AM/PM ☐ 2DAY AIR(AM/PM) ☐ 3 DAY AIR ☐ WILL CALL ☐ TRUCK

☐ FREIGHT COLLECT #_____ ☐ OTHER _____

PART#	QTY.	DESCRIPTION	PRICE	AMOUNT

SUBTOTAL _____

TAX _____

TOTAL _____

ORDERED BY: _____

1340 NORTH MELROSE DRIVE, VISTA, CA 92083 DWT PHONE: 760.758.5560 FAX 760.758.5991