

Order Form

Step 1: Company Information

Company:	
Address:	
City/ State/Zip:	
Country:	
Phone:	
Fax:	
E-mail address:	

Step 2: Shipping Address

Company:	
Address:	
City/ State/Zip:	
Country:	
Phone:	
Fax:	
E-mail address:	

Step 3: Payment Information

PO #:

I'd like to pay by:

- Wire Transfer
- Credit Card: (choose one)
- Mastercard
- Visa
- American Express

Account Number:	
Expiration Date:	
Cardholder Name:	
Signature:	

Step 4: Fill In

Ordered By:	
Signature:	
Phone #:	
End User:	
Title:	
E-mail address:	

Step 5: Product Selection

Quantity	Catalog Number	Description	Unit Price	Extended Price
Subtotal:				

Step 6: E-mail, Fax, or Mail to Premier Lab Supply

Info@premierlabsupply.com Fax: 772-873-1800

691 NW Enterprise Drive, Port St. Lucie, FL 34986