

ORDER CONFIRMATION

Please complete all information and review for accuracy. This is a non-cancellable agreement.



B I L L T O	Company Name	<input type="text"/>	S H I P T O	Company Name	<input type="text"/>
	Address	<input type="text"/>		Address	<input type="text"/>
	City/State/Zip	<input type="text"/>		City/State/Zip	<input type="text"/>
	Contact Name	<input type="text"/>		Onsite Contact	<input type="text"/>
	Phone	<input type="text"/>		Phone #	<input type="text"/>
	Fax	<input type="text"/>		2nd Contact and Phone #	<input type="text"/>

Delivery Date: Time Frame: Stairs? Pick up Date: Time Frame:

Will Contact Person be on site? Room Number: Will Room be Ready? Security Screening?

Key Operator: Location Hours: After Hours Service needed

COPIERS

Quantity Needed Type If Both, specify quantity of each Speed

Color Black & White

Additional Features (check all that apply)

Staple Finisher 3 Hole Punch Print Scanning* Fax

**will require networking*

PRINTERS

Quantity Needed Type If Both, specify quantity of each

Color Black & White

OTHER EQUIPMENT

Projectors Needed Scanners Needed Faxes Laptops Needed Desktop units needed

Shredders Needed Paper? 8-1/2 x 11 8-1/2 x 14 11 x 17

CONNECTIONS

How many computers will be connected? Will you require networking? Computer Type(s): PC Mac

Operating System: **Windows 7 does not support USB connections*

If Connection Type is NETWORKING, please complete the following:

Who will perform Networking on site? Do you have administrative rights on your computer? (Please note that without administrative rights your computer cannot be networked by our technician)

Please indicate additional items needed: Wireless Router Any Cables Needed Switchbox

Additional Notes

Payment Info

Payment Type Credit Card #

Exp Date SIC

**Orders without payment may be subject to delay or cancellation*

Name On Card:

I understand that the information I have provided above is critical to the efficiency and accuracy of my equipment installation. Any additional time and resources spent due to inaccurate or incomplete information may result in additional charges above the initial contract.

Approval Signature _____

Print Name _____

Date _____