

SECTION A

First Name Last Name

Telephone Email
Telephone number and email address are required for UPS shipping, tracking & delivery confirmation.

Ship to

COMPANY NAME	
ADDRESS LINE 1	
ADDRESS LINE 2	
CITY	PROVINCE/STATE
COUNTRY	POSTAL CODE/ZIPCODE

SECTION B

Customer type

<input type="checkbox"/> Authorized Sales Representative	<input type="checkbox"/> Architect/Design Engineer
<input type="checkbox"/> General Customer/End User	<input type="checkbox"/> Prefer not to disclose

Quantity of catalogues requested _____ Individual catalogue(s)
300 pages per catalogue, 3 lbs per catalogue _____ Box(es)
22 catalogues per box, 55 lbs per box

How soon do you want the catalogue(s) to arrive?
We appreciate you for helping us minimizing our shipping cost.

<input type="checkbox"/> Within 3 business days
<input type="checkbox"/> Within 5 business days
<input type="checkbox"/> Within 2 weeks

SECTION C **OFFICE USE ONLY**

Account Manager Approval Yes No

Signature Date **MM-DD-YYYY**

Executive Manager Approval Yes No

Signature Date **MM-DD-YYYY**
