RAYZIST PHOTOMASK ORDER FORM

RAYZIST PHOTOMASK, INC. • 955 PARK CENTER DRIVE • VISTA, CA 92081 • 1.800.729.9478
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Company Name _____ Contact _____ Date _____

Address _____ City _____ State _____ Zip _____

Phone ( ) _____ Fax ( ) _____ E-mail _____

ITEM #	DESCRIPTION	QTY	PRICE	TOTAL

Please ship my order by:

- UPS Red next day service ☐
- UPS Blue 2 day service ☐
- UPS Orange 3 day service ☐
- UPS Ground 3 to 7 days ☐
- FedEx Recipient*(CC orders only) ☐
- Pick Up ☐

Special Instructions: _____

* FedEx Recipient Method: _____ * FedEx Account # _____

Method of Payment - check & indicate credit card # (if not on file with us already)

- ☐ ***MC/VISA -Card #*** _____ ***EXP*** _____ ***CCVC*** _____
- ☐ ***AMEX/DISCOVER -Card #*** _____ ***EXP*** _____ ***CCVC*** _____
- ☐ ***TERMS - Already Preapproved Terms***
- ☐ ***C.O.D.*** *(If none of the above are indicated, order will automatically be *C.O.D.). Any C.O.D. order over $500.00 will require a cashier's check*

We appreciate your business and look forward to serving you again.