

## RVB Systems Group Order Form

Order by Fax: (919) 342-5649

Order by e-mail: sales@barcode-solutions.com

Order by Phone: (919) 362-5211

Enter BILL TO Address	Enter SHIP TO Address (only if different than BILL TO)
Company _____	Company _____
Contact _____	Contact _____
Email _____	Address _____
Address _____	City _____ State _____ ZIP _____
City _____ State _____ ZIP _____	Phone _____
Phone _____ Fax _____	Fax _____

**PURCHASE ORDER CUSTOMERS – New customer must include CREDIT APPLICATION – Terms NET 30**

Purchase Order #: \_\_\_\_\_ Authorized by: (PRINT) \_\_\_\_\_  
 Authorized by: (sign) \_\_\_\_\_ Date \_\_\_\_\_

**CREDIT CARD CUSTOMERS**

CARD TYPE	CARD NUMBER	Exp (MM / YY)	CVV / CID (Security Code)
<input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DISCOVER	_____ - _____ - _____ - _____	____ / ____	_____
<input type="checkbox"/> AMEX	_____ - _____ - _____	____ / ____	_____

Name as it appear on card (PRINT) \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

**TO BE COMPLETED BY RVB SYSTEMS - Authorization Code \_\_\_\_\_ Authorization Date \_\_\_\_\_**

**If you prefer to use this credit card for all future orders, please complete the following:**  
 I, \_\_\_\_\_, authorize RVB Systems Group to use the above referenced credit card account for all future orders.  
 Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_

**SELECT SHIPPING METHOD (Freight charges prepaid and added to invoice. Shipped Ground if not specified)**

Ground  Next Day  2nd Day  COLLECT (Include Account #) \_\_\_\_\_

**ENTER AND TOTAL YOUR ORDER**

Please confirm order via EMAIL ADDRESS: \_\_\_\_\_ Quote # (if applicable) \_\_\_\_\_

Product #	Complete Product Description <small>(Example: 4.0" wide by 1476' long Black WAX/RESIN ribbons for ZEBRA)</small>	Unit Price	# of Units	Extended Price
		\$	x	= \$
		\$	x	= \$
		\$	x	= \$
		\$	x	= \$

(In NC add 6.75% sales tax) (In CA add 7% sales tax for RIBBONS ONLY) SALES TAX \$

NOTE: SHIPPING CHARGES WILL BE PRE-PAID AND ADDED TO INVOICE UNLESS SHIPPED COLLECT	<b>TOTAL</b>
	\$

**Return Policy:** All equipment factory warranted for 1 year. DOA equipment must be returned within 15 days of receipt with valid RMA #. All other equipment returns accepted within 20 days of receipt with valid RMA # and \$50 restocking charge. Call (919) 362-5211 for authorization. No equipment returns after 20 days. **No returns accepted for pre-packaged software, labels, ribbons or other media.**