

DEMCO® WEB ORDER FORM

• Please photocopy this page for multiple forms. •

1 Ship To

Customer Number _____
Please refer to mailing label for your Customer Number.

Name _____
Please Print

Title _____ Dept. _____

Organization _____

Street* _____ Mail Code _____
* We cannot ship to a P.O. Box. Please supply a street address.

City _____ State _____ Zip _____

Daytime Phone () - FAX () -

E-mail _____ Check if you prefer not to receive e-mail updates on DEMCO specials and promotions.

Bill To (Fill in only if different than "SHIP TO" Address)

Ordered by _____

Organization _____

Street _____ Mail Code _____

City _____ State _____ Zip _____

Daytime Phone () - FAX () -

E-mail _____ Check if you prefer not to receive e-mail updates on DEMCO specials and promotions.

Tax Exempt Number _____
Please enclose a copy of your certificate.

Contract Number (If Applicable) _____

2 Method of Payment (No C.O.D.s please)

PURCHASE ORDER
P.O. # _____ Date _____
Authorizing Signature _____

CONFIRMING ORDER

BILL EXISTING ACCOUNT

OPEN NEW ACCOUNT (See Page 843)

CHECK ENCLOSED (Prepaid Orders) _____ \$ _____

CREDIT CARD (Fill out information to the right)



Mastercard American Express SmartPay (Federal) Open New Account

VISA Discover Bill Existing Account

Account Number _____ Expiration Date _____

Cardholder's Organization (if applicable) _____

Cardholder's Name (Please Print) _____

Authorizing Signature _____

Street or P.O. Box (Cardholder's billing address required-must match card) _____

City _____ State _____ Zip _____

3

Product Number	Description	Qty	Unit: Ea. Pkg. Box	Size, Style or Color	Unit Price	Total Sale

4 To best serve your delivery needs check 1 or more boxes below

If ordering Stock Items:

Please rush! Overnight delivery needed*

For Items Shipping by Truck

Please deliver between _____ and _____ o'clock*

Please call before delivery

Contact Name _____ Contact Number _____

Is a loading dock available?

Yes No, I need a lift gate* No, I need inside delivery*

**Extra charges may apply for these services, call 800-356-1200 for details.*

Sales taxes vary by state and will be calculated when applicable.

Shipping charges will be prepaid and added to your invoice.

Subtotal	
Sales Tax (where applicable)	
Shipping & processing charges (SEE PAGE 843)	
Total	

Thank You!

100% Satisfaction Guaranteed! Period.

DEMCO, Inc., P.O. BOX 7488, Madison, WI 53707-7488

800-356-1200
demco.com

24-hour FAX
800-245-1329

Quantity Bids
800-462-8709
quote@demco.com

Customer Service
800-962-4463
custserv@demco.com

International Orders
international@demco.com

