



P.O. Box 2833
Granite Bay, CA 95746

Toll Free: (877) 504-6008
FAX: (800) 508-2271

ORDER FORM

(To be submitted by Fax or Mail)

Date: _____

P.O. Number (if any) _____

CellPower Acct # (if known): _____

NAME (As appears on Credit Card) & CONTACT INFO:

(First, Initial, Last)	_____
Phone Number:	_____
E-mail:	_____

PAYMENT INFORMATION:

<input type="checkbox"/>	Via Account Terms <i>(prior approval required)</i>
<input type="checkbox"/>	Check or Money Order
<input type="checkbox"/>	Via Credit Card
Card #:	_____
Expiration (MM/YY):	_____
Cardholder's Signature:	_____

ADDRESS INFORMATION:

BILLING ADDRESS (Credit Card Billing Address)

Name: _____

Street or P.O. Box: _____

(Address 2): _____

City, State, ZIP: _____

SHIPPING ADDRESS (if different)

ITEMS BEING PURCHASED:

Item #:	Qty	Description	Unit Cost	Total
Tax		(CA shipments only, 7.25%)		
*Shipping	1			

*Shipping Options:

- Standard Delivery** \$4.95 flat rate (any quantity, 3-5 day delivery)
- 3-Day Delivery**** \$9.95 for first item + \$2.00/each additional item
- 2-Day Delivery**** \$16.95 for first item + \$2.00/each additional item
- Next Day Delivery**** \$32.95 for first item + \$2.00/each additional item

Total:

** Delivery Time Guaranteed