Offline Order Form

Phone: 800.238.8009
Fax: 800.238.3117

Federal Tax ID#: 75-2986112
Email: sales@acpdirect.com

Mailing Address: **ACP Direct**
P.O. 703168
Dallas, TX 75370

Requester Name_____ Title_____

E-mail_____ Phone_____ Fax_____

SHIP TO:

Institution:_____

Attention:_____

Address: _____

City:_____ State:_____ Zip:_____

Phone:_____ Fax:_____

Confirmation Email:_____

BILL TO: Billing info same as shipping? Yes / No

Institution:_____

Address:_____

City:_____ State:_____ Zip:_____

Billing Contact:_____

Phone:_____ Fax:_____

CREDIT CARD PAYMENT Card#_____ Exp Date_____

Name on Card_____ CVV2 Code_____

Billing Address_____ City_____ ST_____ Zip_____

Item #	Qty	Description	Unit Price	Total Price

PO#_____

We accept purchase orders from all state and federally funded institutions.

Authorized Signature _____

Title_____

Date _____

*For shipping costs, please visit **www.acpdirect.com/shipping** or contact us.

Subtotal	
Tax (if applicable)	
*Shipping	
Order Total	