

BILLING INFORMATION	Customer Account No.: Date:						
Name:	Phone:						
Company:	Email:						
Address:							
City: State: Zip:							
Bill My Account: YES / NO			PO	Number:			
<b>SHIPPING INFORMATION</b> (if different than above)							
Name:		Phone:			Fax:		
Company:		Email:					
Address:							
City:			Stat	e:	Zip:		
Order Picked Up: YES / NO Signature:					Date Signed:		
PRODUCT					QTY	TOTAL	
FRODUCI		Ea		Pack	QII	TOTAL	
PCM Cassettes (25mm, 0.8 μm MCE)		\$ 1.		\$ 56.00/50			
TEM Cassettes (25mm, 0.45 μm MCE)		\$ 2.		\$ 112.00/5			
Metals Cassettes (37mm, 0.8 µm MCE)		\$ 2.		\$ 112.00/50			
Metals Cassettes (37mm, 0.8 μm PVC)	\$ 7.		\$ 393.50/50				
Metals/Dust Cassettes (37mm, 0.8 µm MWMCE)	\$7.		\$ 393.50/50				
Dust Only Cassettes (37mm, 0.45 µm MWPVC)	\$ 7.		\$ 393.50/50				
Metals Water Bottles (250mL HDPE)		\$ 3.		\$ 80.88/24			
Centrifuge Tubes	\$ 0.	34	\$ 17.00/50				
Ghost Wipes		\$ 0.	28	\$ 5.60/20			
Wipe Template (10x10 Disposal)		\$ 0.5	56				
Wipe Template (12x12 Disposal)		\$ 0.8	34				
Other (please write or type below)							
SUBTOTAL							
Sales tax (to be calculated by Acctg) applies to equipment rental, media sales, & flat rate shipping costs. TAX (TBD)						TBD	
Next Business Day - @ 8:00 AM - \$75.00  @ 10:00 AM - \$50.00  @ 3:30 PM - \$35.00    2-3 Business Days - \$25.00  7-10 Business Days - \$15.00  For Sat Delivery, please call us.  SHIPPING    Use FedEx / UPS Account No.:  Second							
TOTAL							

## **PAYMENT INFORMATION**

Credit Card Type:	Visa	MC	AMEX	Discover	Cardholder's Name:		
Credit Card No.:					Expiration Date:	Security Code:	

Phone and fax orders may be placed during business hours 8:00am - 5:00pm PST. Mail orders to SGS Built Environment, Attn: Customer Service: FOR INTERNAL USE Southern CA Northern CA 19743 Cabot Blvd. 20535 South Belshaw Ave. Shipped By: Hayward, CA 94545 Carson, CA 90746 Tel: 310/763-2374 Tel: 510/887-8828

Fax: 310/763-4450

Delivery shipped within 2 business days.

Date Shipped:

FedEx/UPS Tracking No.:



BILLING INFORMATION	Custom	er Account N	lo.:		Date:			
Name:	Phone:			Fax:				
Company:	Email:							
Address:								
City:				State: Zip:				
Bill My Account: YES / NO				PO Number:				
SHIPPING INFORMATION (if different	ent than above)							
Name:			Phone:	Phone: Fax:				
Company:			Email:					
Address:								
City:	City:					Zip:		
Order Picked Up: YES / NO	Signature:					Date Signed:		
PRODUCT						QTY	TOTAL	
			Ead	ch	Pack of 10			
Malt Extract Agar (MEA) Plates				25	\$ 22.50			
Tryptic Soy Agar (TSA) Plates				25	\$ 22.50			
Allergenco-D Cassettes	\$ 5.	62						
37mm Polycarbonate Filters	N/	Ċ						
Tape Lift Kits (2 Slides)	\$ 6.	\$ 6.74						
Tape Lift Kits (5 Slides)			\$ 11	.24				
Dustream <sup>™</sup> Kits for Allergen (OK fo	5) \$ 22	.47						
Additional Dustream <sup>™</sup> Kit Filters fo	\$ 3.	37						
Water Bottles with Sodium Thiosulf	\$ 1.	69						
Water Bottles with Sodium Thiosulfate (290mL)			\$ 2.	25				
Other (please write or type below)								

			SUBTOTAL	
Sales tax (to be calculated by Acctg) applies to equipment rental, me	dia sales, & flat r	ate shipping costs.	TAX (TBD)	TBD
Next Business Day - @ 8:00 AM - \$75.00  @ 10:00 AM - \$50.00    2-3 Business Days - \$25.00  7-10 Business Days - \$15.00  For    Use FedEx / UPS Account No.:	@ 3:30 PM - \$ Sat Delivery, plea 		SHIPPING	
			TOTAL	

## **PAYMENT INFORMATION**

Credit Card Type:	Visa	MC	AMEX	Discover	Car	Cardholder's Name:				
Credit Card No.:					Exp	piration Date:		Security Code:		
Phone and fax orders Mail orders to SGS Bu				n - 5:0	5:00pm PST. Delivery shipped within 2 business days.					
Northern CA			ithern CA	Siner Service.		FOR INTERNAL USE				
19743 Cabot Blvd.				Belshaw Ave.		Shipped By:		Date Shipped:		
Hayward, CA 94545			son, CA 9			Shipped by.		Date Shipped.		
Tel: 510/887-8828 Tel: 310/763-2374 Fax: 310/763-4450					FedEx/UPS Tracking No.:					