

genX – Order Form

Fax To: 519-826-6947

Order Taken By	Date/Time of Order	Date Required	Sales Rep	PO#
Voltage	Voltage Confirmed With:			

Shipping Method – Please Check One

- UPS Next Day
 UPS 2nd Day
 UPS Ground
 FedEx
 DHL

Bill to: _____

Ship to: _____

Contact: _____

Phone: _____

Fax: _____

Email: _____

Cat. #	Product Description/Unit	Qty	Price	Discount	Amount

SPECIAL REQUIREMENTS/INSTRUCTIONS