



Date: _____

COMPANY INFORMATION

Name:		
Address 1:		
Address 2:		
City:	State:	Zip:
Phone:	Fax:	Web:

CONTACT INFORMATION

Name:		Last Name:	
Phone:	Ext:	E-mail:	

Item	Model	Description	Price p/ Carton	Qty	Total
Balanzza Ergo Gray	BZ200	Carton of 20 units	\$ 250		
Balanzza Too	BZ300	Carton of 20 units	\$300		
Balanzza Mini	BZ400	Carton of 20 units	\$ 250		
Harnezz	BZ500H	Carton of 10 units	\$ 50		
Strapz	BZ500S	Carton of 10 units	\$ 50		
Hard Case for BZ200 and BZ300	BZ500C	Carton of 10 units	\$ 30		

Additional Instructions:	
Total:	

SHIPS TO:

Same address as above:

Attention:		
Company:		
Address 1:		
Address 2:		
City:	State:	Zip:
Phone:	Fax:	

SHIPPING OPTIONS:

<input type="checkbox"/> UPS Ground (Included)
My Own Shipping Account:
<input type="checkbox"/> UPS
<input type="checkbox"/> Fedex
<input type="checkbox"/> Other: _____

Note: Shipping fees could be charged based on your selected method.

PAYMENT INFO:

<input type="checkbox"/> Credit Card
<input type="checkbox"/> Check (Include in Original Order)
<input type="checkbox"/> Other

Visa / MC / Amex / Disc
Name on CC:
Number:
Exp Date:
Security #:
Billing Zip Code: