WH1 WH2 WH3

SVI SVIOEF.PMD

Order Entry Form

Entered By: _____

Date: _____ **Time:** _____

	SVI Cust. #	Purchase Order #	Placed By:	Date:	Order Taken By:

Ship To:

Sold To:

Attention:

Phone # ( )

QTY	SVI Part # & Description	1	2	3	Price Ea.	Ext. Price

Special Instructions:

SVI International, Inc.
101 W. Illinois Ave • Aurora, IL 60506
Ph. 630-844-5566 • Fax 630-844-6770
Ph. 800-321-8173 • Fax 800-899-1784

Ship: COMPLETE • PARTIAL • WHEN IN • TODAY

Ship By: circle one **UPS UPS-BLUE UPS-RED UPS-SAT UPS-3DS PICK-UP DELIVER TRUCK**

Other: _____

Terms: **01 02 03 04 05 06 07 08 10—**

Verification Amount _____

Card Number VS MC AE DS

_____

Name _____

Exp Date _____ Auth # _____

SVI is your answer!