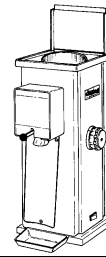




**USA, Inc.**  
 U.S. Distribution Center  
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**PURCHASE ORDER**

*Complete, Sign and Return*

<p><b>Acct:</b></p> <p>Ordered by:          Name _____          Company _____          Phone _____          Fax _____          Email _____          Billing _____          Address _____          _____  <input type="radio"/> Residential? or <input type="radio"/> Commercial?</p>	<p><b>Terms:</b></p> <p>Ship To:          Name _____          Company _____          Phone _____</p> <p>Shipping _____          Address _____          _____  <input type="radio"/> Residential? or <input type="radio"/> Commercial?</p>
--	---

Qty	Part #	Description	Cost/Unit	Total

Notes:	Model(s) _____	%
Freight Quote # _____ \$ _____ Days		

Subtotal \_\_\_\_\_

Tax (MI Only) / Freight \$ \_\_\_\_\_ / \_\_\_\_\_

Total \$ \_\_\_\_\_

Date Required by: \_\_\_\_\_

Order Taken By: \_\_\_\_\_

Tracking: \_\_\_\_\_

\_\_\_\_\_ **Authorized Signature of Approval**      **Purchase Order #** \_\_\_\_\_

Internal Order # \_\_\_\_\_

MC /Visa /				
AmEx/Discover	Expiration	/	CVD Code	
Name on Card				
Billing Address				
Auth. Signature				

**Shipping Options:**

UPS Ground

UPS 3 Day Select

UPS 2<sup>nd</sup> Day       UPS 2<sup>nd</sup> Day AM

UPS Next Day     Early AM     Saver

Saturday