



# FAX ORDER FORM

DATE OF PURCHASE ORDER:	PERSONAL CUSTOMER ACCOUNT NUMBER: _____
PURCHASE ORDER NUMBER:	

### SHIP TO:

ATTENTION OF: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ PROVINCE/TERRITORY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

SPECIAL DELIVERY INSTRUCTIONS: \_\_\_\_\_

### INVOICE TO: SAME ADDRESS AS SHIP TO

ATTENTION OF: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ PROVINCE/TERRITORY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

### PAYMENT METHODS:

 Cheque   
 VISA   
 MasterCard   
 American Express
Card #: \_\_\_\_\_ Expiry Date: M M Y Y Bill my Carswell Account #: \_\_\_\_\_

P.O. #: \_\_\_\_\_

Cardholder's Name (Please Print): \_\_\_\_\_

Fax: ( \_\_\_\_\_ ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Tel.: ( \_\_\_\_\_ ) \_\_\_\_\_ ext. \_\_\_\_\_ Signature: \_\_\_\_\_

### MY ORDER:

QTY	PRODUCT DESCRIPTION	UNIT PRICE

Shipping and handling are extra. Prices subject to change without notice and subject to applicable taxes.

### TRIFORM MAILING ADDRESS:

Attention: Genie Carreiro, Triform Specialist  
Triform (Thomson Reuters)  
2075 Kennedy Road, Toronto, ON Canada MIT 3V4  
Telephone: 416-226-6000

**TO PLACE YOUR ORDER: FAX TOLL-FREE 1-800-563-1666**