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FAX/MAIL ORDER FORM

Billing Address

Company _____
 Address _____

 City _____
 State _____ ZIP _____
 Contact _____
 Phone _____

Shipping Address

Company _____
 Address _____

 City _____
 State _____ ZIP _____
 Contact _____
 Phone _____

Item #	Description	Quantity	Unit Price	Total Price
			TOTAL	

Special Instructions

Payment Method

Purchase Order # _____ Ordered By _____ Date: _____
 Please Charge my Credit Card: Visa Master Card Am. Express
 Credit Card Number _____ Exp. Date _____

I hereby authorize Hennessy Research Associates, LLC to charge the above Credit Card Account for this purchase.

Signature _____

- ◆ All prices are in U.S. dollars
- ◆ Orders are shipped Fed Ex Next Day Delivery on Monday, Tuesday and Wednesday
- ◆ Shipping, Handling, Packaging and State Taxes are added to invoice totals