

# Purchase Neutronics

## Contact Information

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail \_\_\_\_\_

Bill To Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Ship To Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Model</b>	<b>Price Each</b>	<b>Quantity</b>	<b>Subtotal</b>
RI-2004-HV	\$1,199.00	_____	\$ _____
RI-2004-HVP	\$1,499.00	_____	\$ _____
<b>Total</b>	<b>\$ _____</b>		

## Payment Information

I will mail a check.

I will pay by credit card (call (817) 636-2089 with information)

MAILING ADDRESS  
Pure Chem Separation  
11050 South HWY 287  
Rhome, TX 76078

FAX  
(817) 636-9007