



FIRST DISPLAYS INC.

38-14 30th Street, Long Island City, NY 11101, USA
Voice: (718) 752-1559 Fax: (718) 732-2509
Email: info@FirstDisplays.com Web: www.FirstDisplays.com

Order Form

Date: _____

Print this form and fill out all applicable fields below.

Fax to: (718) 732-2509 or mail to 38-14 30th Street, Long Island City, NY 11101, USA

Name: _____

Company: _____

Telephone: _____ Fax: _____

Email: _____

Billing Address (Credit card statement address)

Address line 1:	_____
Address line 2:	_____
City:	_____
State / Province:	_____ ZIP / Postal: _____
Country:	_____

Shipping Address (if different with billing address)

Company:	_____
Address Line 1:	_____
Address Line 2:	_____
City:	_____
State / Province:	_____ ZIP / Postal: _____
Country:	_____

Credit Card Info: (if applicable) Visa Master Discover American Express

Number: _____ Exp. Date _____

Verification # _____ Card Holder Name: _____

For your safety and security, my merchant account requires that you enter your card's verification number. For Visa/Master/Discover card, the verification number is a last 3-digit at the back of card. It appears after and to the right of card number. For American Express card, the verification number is a last 4-digit printed on the front of the card. It appears after and to the right of your card number.

Visa / Master / Discover



American Express



Other Payment Method: Money Order or Cashier Check; PayPal to first.displays@verizon.net

Order Information:

Quantity	Product #	Product / Service Description	Unit Price	Amount
Sub Total				
Shipping				
New York State Sales Tax 8.875%				
Total				

Carrier: FedEx UPS Service: Ground* 3 Day 2 Day Next Day

Shipping Acct #: _____ Billing Acct ZIP code _____

*Ground service is for UPS only, FedEx Ground service is unavailable