



# FIRST DISPLAYS INC.

38-14 30<sup>th</sup> 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 30<sup>th</sup> 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 he 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 you card number.

Visa / Master / Discover



American Express



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

### Order Information:

Quantity	Product #	Product / Service Description	Unit Price	Amount
			Sub Total	
			Shipping	
			New York State Sales Tax 8.375%	
			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