## **Turning Point** Therapy & Technology, Inc.



City

## **Purchase Order/Order Form**

P.O Number	
P.O. Date	

## **Ordered By Deliver To** Company Company Address Address City State/Province Zip/Postal Code State/Province Zip/Postal Code Country Country **Phone Number** Phone Number Fax Number Fax Number **Contact Name** Contact Name

ltem No.	Description			Quantity	Unit Price	Amount	
Shipping Charge Calculations			Total				
Software Other Items			State Tax @				
otal Order (\$)		Shipping	Fec	Federal Tax @			
< 300 300 - 500	7.50 15.00	≤ 100 > 100	\$10 10% of order		Shipping Charge		
> 500 - 500	free > 100	> 100	10% of order				
500				Grand Total			

## **Authorized By**

Turning Point Education. \* 889 Landa St. \* New Braunfels, TX \* USA \* Phone: 877-608-9812 Fax: 830-608-0882 \* www.turningpointtechnology.com