

# OFFICE ACCESS ORDER/QUOTE FORM

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## CONTACT INFORMATION

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

## CARTRIDGE INFORMATION

Let office access do the work for you, simply put down machine type and we will find the right cartridge to meet your needs. If you already know the cartridge enter it below.

**CHECK B FOR BRAND NAME AND R FOR REMANUFACTURED**

### MACHINE TYPE(S)

B	R		B	R	
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

### CARTRIDGE TYPE(S)

B	R		B	R	
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	_____

## OFFICE ACCESS ORDER/QUOTE FORM

This form can be used to place orders or to request a quote on your carriage, ribbon or toner needs. Please inform us if this form is for a quote or an order (check one)

QUOTE     ORDER

OFFICE ACCESS WILL QUOTE PRICES WITHIN ONE DAY OF RECEIVING THIS FORM OR PLACE ORDERS THE DAY THE FORM IS RECEIVED

PREFERRED METHOD OF CONTACT (CHECK ONE)

E-MAIL     PHONE     FAX