

Counterfeit Components Workshop

Notes Order Form

Name _____
Title _____ Company _____
Division _____
Address _____ M/S or Suite # _____
City _____ State/Prov _____ Postal Code _____
Country _____
Phone _____ Fax _____
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Notes

	Quantity	Total
Los Angeles, Nov 29-30, 2006	_____ @ #100 each	_____
Orlando, Feb 28 - Mar 1, 2007	_____ @ \$100 each	_____
London, May 2-3, 2007	_____ @ \$120 each	_____
Priority Mail shipping		_____ \$ 7.00 U.S.
DHL for International orders		_____ \$ 25.00 U.S.
	Total	_____

Multiple copies will be combined, call for a quote.

Payment must accompany order. Company checks must be made out to Components Technology Institute, Inc. and payable in US dollars drawn on a US bank. Credit card payment requires card number, expiration date, and signature. **FAX THIS FORM TO: 256-539-8477.**

Payment Method: AMEX VISA MC Check

For Information Call: 256-536-1304