

TRINER SCALE

8411 Hacks Cross Road
Olive Branch, MS 38654-4010
TEL: (662) 890-2385 or (800) 238-0152

Rate Chip Order Form for January 21, 2018 Rate Change

**FAX order form to: (662) 890-2386
or (662) 890-3186**

TO ORDER YOUR RATE CHIP(S)

- 1) PROVIDE PAYMENT METHOD: Section A or B Must Be Completed**
 - A) VISA or MASTERCARD:** Complete Section A. Your order will be processed and charged to Visa or MasterCard. A paid receipt will mail to you separate from your chip shipment.
 - B) CHECK:** Your order will be processed when we receive this form AND YOUR CHECK. A receipt will be mailed.
- 2) Fill in the quantity and price in the Rate Chip Ordering Chart below.
- 3) Complete the Billing and Shipping section. For your order to be processed, all blanks in the Bill To section must be completed.
NO VERBAL ORDERS—NO EXCEPTIONS.
- 4) Fax OR mail in your order (**DO NOT DO BOTH** —duplicate orders will result)
 - FAX Order: (662) 890-2386 or (662) 890-3186
 - MAIL Order: Triner Scale, 8411 Hacks Cross Road, Olive Branch MS 38654-4010

Triner Scale's Tax ID #: 62-1206191

★ PAYMENT METHOD

A) VISA or MasterCard # _____ **Exp Date** _____ **Val. Code** _____
 Cardholder's name as it appears on card _____
 (last 3 numbers printed on back of card)

B) Mail-in Check: Mail in this form with Check or Money Order payable to Triner Scale. Check is Enclosed

★ RATE CHIP ORDERING CHART

Scale Model	Part No.	Qty	Price	\$ Totals
TS-70PX	RC001		\$185.00	
TS-70xi	RC030		185.00	
TS-70P	RC002		185.00	
VP-70	RC034		185.00	
TS-30P	RC004		182.00	

★ **ORDER CANNOT BE PROCESSED IF NOT COMPLETED**

Quantity of Chips	Priority Mail \$	Express Mail \$
1-5	\$6.70	\$24.70

SHIPPING \$

GRAND TOTAL \$

Add shipping price before totaling

IMPORTANT NOTICE: DUE TO THE NATURE OF THIS ITEM, REFUNDS ARE NOT AVAILABLE.

Make absolutely sure you are ordering the correct model rate chip. Rate chips are produced based on orders received. All sales are final. Exchanges can be arranged by contacting us at (800) 238-0152. All exchanges are subject to a 30% restocking fee.

★ BILLING AND SHIPPING

BILL TO: All blanks MUST BE COMPLETED

Post Office/
Company _____

Attn.: _____

Street _____

City _____ State _____

ZIP _____ Phone _____

SHIP TO: **ONLY IF DIFFERENT** than Bill To address

Post Office/
Company _____

Attn.: _____

Street _____

City _____ State _____

ZIP _____ Phone _____

NO WARRANTY. The software is provided "as is" without warranty of any kind, either express or implied, including without limitation any implied warranties of condition, uninterrupted use, merchantability, fitness for a particular purpose, or non-infringement.