

**Test & Measurement Guide  
Hardware Fixture Order Form**



**SHIPPING INFORMATION**

Company Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 Shipping Address: \_\_\_\_\_

**ORDER INFORMATION**

Part	Unit Price	Quantity (Limit 1)	Amount
TPA-P + TPA-R Test Fixture (CBDCT)	500.00 USD		\$
Domestic Shipping (USA)	10.00 USD		\$
International Shipping (Non-USA)	50.00 USD		
<b>Total Due</b>			<b>\$</b>

**PAYMENT OPTIONS**

**Check/Money Order**      Make Payable to Digital Display Working Group  
**Mail Order & Check to:**      **Digital Display Working Group**  
 ATTN: TPA Board Order Desk  
 PMB 511  
 16420 SE McGillivray, Suite 103  
 Vancouver, WA 98683

**Credit Card**  
**Fax Order to:**                      **(360) 859-9015**

VISA     MASTERCARD

Number: \_\_\_\_\_ Exp Date    /    \_\_\_\_\_  
 Cardholder Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>FOR OFFICIAL USE ONLY</b>	
__ If Membership Verified	
Date Shipped: _____	By: _____

**RETURNS ARE NOT ACCEPTED**