

Order details are on the next page.

Confid, Inc.

20280 S. Vermont Ave. Ste 200, Torrance, CA 90502 Tel (310)532-2210 Fax 9310)515-6893 www.confiad.us

Material Order Form

Seller's Company Name: Confid, Inc.	Date:				
Buyer's Company Name:	Customer ID#:				
Billing (☐ same as registered)					
Company Name:					
Address:	Suite, APT#:				
City:	State/Province:				
Zip/Postal Code:	Country:				
Tel: Fax:	email:				
Shipping (☐ same as billing)					
Company Name:					
Address:	Suite, APT#:				
City:	State/Province:				
Zip/Postal Code:	Country:				
Tel: Fax:	email:				
Is this order tax exempt?					
Is this order tax exempt? Yes (Please provide Confid with resale certificate on file.)					
\square Yes (Please provide Confid with resale certificate on file.)					
☐ Yes (Please provide Confid with resale certificate on file.) ☐ No (The tax will appear on order confirmation and invoice.)					
☐ Yes (Please provide Confid with resale certificate on file.) ☐ No (The tax will appear on order confirmation and invoice.)					
☐ Yes (Please provide Confid with resale certificate on file.) ☐ No (The tax will appear on order confirmation and invoice.) (If any) ☐ Warranty or discount authorization No.	Invoice (☐ same as Order Confirmation)				
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Order Details

Products*	Surface Products**			Confiad Products				Amount
Products	Brand	Color	Model No.	Size (ml)	Color	Quantity	(without tax)	Amount
		1						
		 	+					
+								
	dhesive, Dispense		-	•		-	Subtotal	
Surface Products: If you are not sure which Confiad color to match your surface product,						,	Tax	
please fill out its brand and color, then the size and qunatity of Confiad adhesive. We are happy to recommend the best match.							Freight	
							Total	
							L	
	hul Dota ar!	۵					CO N-	
Confid use only) Date received							SO No.	