PRODUCT ORDER FORM

Biometics International, Inc.
E-Mail: BecksBiometics@BeckInc.com
Fax 707-220-4187

BIOMETICS

Date of Order (mm/dd/yy) ___/___/___

I. Purchased By: (Please Print Clearly in Black Ink Only)

Distributor Name - Last, First, Middle Initial | MI

Distributor I.D. #

Distributor Phone #

Fax #

Payment Method: (Please check one) ☐ Cash ☐ Check ☐ Money Order ☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

Credit Card #

Exp. Date mm/yy

Print Name as it appears on Credit Card

Signature

II. Shipping Information (Please check one)

☐ Standard Delivery (Guaranteed within 5 days*)
☐ Express Delivery (Guaranteed within 3 days*)
☐ Will Call

*All days refer to business days.

Shipping Charge is based on Retail Price.

Standard: 5% of Total Retail Price ($5.00 Minimum)
Express: 9% of Total Retail Price ($10.00 Minimum)
2-Day Air: 18% of Total Retail Price ($20.00 Minimum)
(2-Day Air MUST be requested by phone.)

Please Note:
$5.00 service charge will be applied to every order shipped. Distributor will be charged for any forwarding cost. Alaska, Hawaii & Puerto Rico will be charged Express Delivery Rates plus a $10.00 service fee per order. Puerto Rico residents, please allow up to 8 Business Days for delivery.

SHIP TO: ☐ Check Here to Use Distributor Shipping Address on File

Name: Last, First, Middle Initial | MI

Shipping Address (Note: Shipments cannot be made to P.O.Box)

Apartment #

City

County

State

Zip Code

Shipping Phone #

Email (to receive shipment confirmation via e-mail)

Sales Tax: In the states where Biometics has agreed to collect tax, in accordance with Multi-Level Marketing regulations, tax is charged on the retail price of all taxable items. In states where Biometics has not agreed to collect tax, distributors are responsible for paying the tax directly to their local taxing jurisdictions.

Qty.	Item#	Product description (Commission Items)	Retail Price / Total Bonus Volume	Total Unit Cost After Discount
Totals			T1➔	T2➔

QTY.	Item #	Sales Aid (non-commission items)	Total Retail
		Total T3➔	

1. Subtotal of all items ordered (T2+T3) =	
2. Shipping Charge (based on T1+T3) x ____ % =	
3. Handling and Residential Charge, if applicable:	
4. Sales Tax (based on T1+T3) x ____ % =	
5. Total Due (add all lines above) =	

Note: I certify that I have sold at least 70% of all products previously ordered by me. I have kept complete and detailed records of my sales and, upon request by Biometics, I am prepared to submit such records to the Biometics home office for verification. I hereby certify that everything contained in this product order form is true and correct.

FOR OFFICE USE ONLY
ENTRY BY
DATE
ORDER #

Signature

Date