



Microlynx Systems Ltd
 #240, 6715-8th St, N.E.
 Calgary, AB T2E 7H7
 Tel: (403) 275-7346
 Fax: (403) 275-9501

M0035 PROCONV ORDER FORM

BILL TO:

SHIP TO:

Company:	
Address:	
City / Prov / PC:	
Tel:	
Fax:	
Attn:	

Ship Via:

- Canada Post
- Collect - Courier & Account #: _____

Quantity Required:	Unit Price: \$ 2,0000 / ea	\$
	SUB-TOTAL	\$
	GST @ 7 % (Canadian customers only)	\$
	TOTAL	\$

Method of Payment:

- Cheque or Money Order** - payment must be received prior to goods being shipped. When paying using this option, goods must be shipped collect via your courier.
- VISA**

The cardholder will pay card issuer the above amount pursuant to the Cardholder Agreement.

Card # _____ Expiry Date: _____ (MM/YY)
 Cardholder: _____ Signature: _____