## Order Form - VacuumTubes.Net

Fields in BOLD print are required

| Full Name          |   |   |  |
|--------------------|---|---|--|
| Company            |   |   |  |
| Address            |   |   |  |
| City               |   |   |  |
| State/Province     |   |   |  |
| Country            |   |   |  |
| Postal Code        |   |   |  |
| Email Address      |   |   |  |
| Telephone          |   |   |  |
| Credit Card        | Visa Discover, Master Card, Amex (circle) |   |  |
| Expiration<br>Date | Mo/Date/Year                              |   |  |
| Credit Card Number |   |   |  |
| C V V Code         |   | This is the last 3-4 numbers on the back of your credit card on the signature panel |  |

## **Enter your Order**

Note: If you will NOT accept an equivalent tube, please place a check mark the box labeled 'No Equivalent'-

## **PLEASE PRINT CLEARLY!!**

|           | Part<br>Number | Qty | Check for<br>No<br>Equivalent |
|-----------|----------------|-----|-------------------------------|
| Part # 1  |                |     |                               |
| Part # 2  |                |     |                               |
| Part # 3  |                |     |                               |
| Part # 4  |                |     |                               |
| Part # 5  |                |     |                               |
| Part # 6  |                |     |                               |
| Part # 7  |                |     |                               |
| Part # 8  |                |     |                               |
| Part # 9  |                |     |                               |
| Part # 10 |                |     |                               |
| Part # 11 |                |     |                               |
| Part # 12 |                |     |                               |
| Part # 13 |                |     |                               |
| Part # 14 |                |     |                               |
| Part # 15 |                |     |                               |
| Part # 16 |                |     |                               |
| Part # 17 |                |     |                               |
| Part # 18 |                |     |                               |
| Part # 19 |                |     |                               |
| Part # 20 |                |     |                               |

Place any comments or instructions below.

FAX this order to: 386-462-5656 or mail it to:

Radio Electric Supply Vacuum Tubes Division 20323 North Hwy 121 PO Box 433 La Crosse, FL 32658