Purchase Order Form

wholesale payments

Account Information

Merchant MID:	Date:	Team:
Merchant DBA:	Sales Rep:	
Phone Number:	Sales Manager:	
Address:		

Equipment Information

Equipment Type	Bill To	Quantity	Price
☐ 3 Pay* ☐ 4 Pay* (*Subject to approval, minimum $1500 sub total required)			Sub Total: $

Shipping Information

Attention To:	Ship To: ☐ Merchant DBA ☐ Sales Rep ☐ Other
Street Address:	
City:	☐ Ground: (Free)
State:	☐ 2 Day: Coverd by Rep / Merchant / WPI *Circle One
Zip:	☐ Overnight: Coverd by Rep / Merchant / WPI *Circle One

WPI Internal

WPI Authorized Signature:

Exception/Special Instructions:

Billing Information

☐ Credit Card*Copy of Drivers License Required		☐ ACH (Attach Voided Check)
Credit Card #:		Routing:
Exp Date:	CVV: /	Account #:
Card Holders Name:		Name on Account:
Terms & Conditions		Name of Bank:

Return Policy: Item must be unopened and returned within 14 days to be eligible for a refund. All returned orders are subject to a 25% restocking fee. Purchase order will be charged immediately after MID is generated.	S&H Cost: $ Sales Tax: $
Authorizing Signature:	*Texas based business subject to sales tax only.
2nd Authorizing Signature:	Total Amount To Be Billed: $