

PURCHASE FORM

PURCHASE PRODUCT

No.	Type	Quantity	Unit Price(US\$)	Amount	Note
1					
2 _					
3 _					
4			Total Amount :		
CONTACT IN	FORMATION				
First Name:		Last Name:			
Company:					
Company Address:				Ci	ty:
State:		Zip / Postal C	ode: C	ountry:	
E-mail:					
Tel:		Fax:			
Website:					
MISCELLANE	OUS				
Lead Time:		Note: In case of any urgently order, you our reference.			II the best lead time for
Shipping T	erm:				
Application	n Range:				

HONEST SENSOR CORP. LTD.

Please send the inquiry form either by facsimile or by mail to Honest Sensor.

For more information, you may refer to Honest sensor general sales and condition on website.