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| **Purchase Order** | | | | | | | | | | | Requested by: | | | | | | | Date Needed: | | | |
| **EQUIPMENT - POS TERMINALS \**Kit includes battery, power supply, and paper roll*** | | | | | | | | | | | | | | | | | | **Quantity** | **Price** | **Total Price** | |
| N5S AT&T LTE Kit\* | | | | N62 AT&T LTE | | | | | N82 AT&T LTE Kit\* | | | | | | | N96 AT&T LTE Kit\* | |  |  | $ 0.00 | |
| N6S AT&T LTE Kit | | | | N6S Countertop | | | | | | N6S Scanner Pro (Terminal & Scanner) | | | | | | | |  |  | $ 0.00 | |
| UN20 | | Ethernet/Wi-Fi | | | | | AT&T/Ethernet/Wi-Fi (w/antenna) | | | | | | | | | | |  |  | $ 0.00 | |
| EF18 | |  | | | | |  | | | | | | | | | | |  |  | $ 0.00 | |
| EF60 | | Embedded N62 | | | | | NFC and Scanner (non-EMV) | | | | | | | | | | |  |  | $ 0.00 | |
| EF920 |  | | | | |  | | | | | | | | | | | |  |  | $ 0.00 | |
|  | | | | | | | | | | | | | | | | | |  |  | $ 0.00 | |
| **ACCESSORIES** | | | | | | | | | | | | | | | | | | **Quantity** | **Price** | **Total Price** | |
| Li-Ion Battery | | | N5/N5S/N82 | | | N6/N6S | | | | | | | N96 | | | | NX2200e |  |  | | $ 0.00 |
| Power Supply | | | N5/N5S | | N82 | | | N96 | | | | N6/N6S | | | N62 | | NX2200e |  |  | | $ 0.00 |
| Docking Stations | | | N5 Charge Only | | | N5 Hotspot | | | | | | | N5S Charge Only | | | | N5S Hotspot |  |  | | $ 0.00 |
|  | | | N6S Docking Station with Printer | | | | | | | | | | N6S Charging | | | | N62 Charging |  |  | | $ 0.00 |
|  | | | N82 Charging Station | | | | | | | | | | N82 Docking Station - Ethernet | | | | |  |  | | $ 0.00 |
|  | | | N96 Charging Station | | | | | | | | | |  | | | | |  |  | | $ 0.00 |
| Silicone Sleeve | | | N5  Black  Grey | | | | | | | | | | N5S  Black | | | | |  |  | | $ 0.00 |
| Holster | | | N5/N5S/N82/N96 | | | | | | | | | | |  | | | |  |  | | $ 0.00 |
| Accessories | | | N5/N5S Screen Protector | | | | | | | | | | N6 Rugged Case | | | | |  |  | | $ 0.00 |
|  | | | N6/N6S Countertop Stand | | | | | | | | | | AT&T LTE SIM Card | | | | |  |  | | $ 0.00 |
| Paper | | | NX2200e/N5/N82/N96 | | | | | | | | | | | | | | |  |  | | $ 0.00 |
|  | | | | | | | | | | | | | | | | | |  |  | | $ 0.00 |

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| **SHIPPING INFORMATION *(Required)*** | | | | | | | | | | | | | |
| Company Name: | |  | | | Contact: |  | | | | | | | |
| Address: |  | | | | City: |  | | | State: | |  | Zip: |  |
| Telephone: |  | | | | Email: |  | | | | | | | |
| Shipping Method: | | Ground (Default)  2 Day  Next Day  Saturday  Other       *(Note: No PO Boxes)* | | | | | | | | | | | |
| Bill your own account for shipping charges: | | | Shipping Account #: |  | | | Carrier: |  | | Special Instructions: | | | |

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| **BILL TO INFORMATION *(Required)*** | | | | | | | | | | | | | | | | | | |
| Company: | | |  | | | Contact Name: | | | | |  | | | | | | | |
| Billing Address: | | |  | | | | | Purchase Order #: | | | | | | | | | | |
| Billing City: | | |  | | | | | | | Billing State: | | |  | Billing Zip: | |  | | |
| Phone: | | |  | | Email Address: | | | | |  | | | | | | | | |
| **CREDIT CARD OPTION** | | | | | | | | | | | | | | | | | | |
| Card Type: | | Visa  MasterCard  AMEX  Discover | | | | | | | | | | | | | | | | |
| Card Number: | | ─      ─      ─ | | | | | | | Exp. Date: | | | / | | CVV Code: | | |  | |
| Cardholder Name: (as it appears on the card) | | | |  | | | | | | | | | | | | | | |
| **INVOICE OPTION *(Subject to credit approval. Contact Nexgo for an application and approval of credit terms.)*** | | | | | | | | | | | | | | | | | | |
| **ACKNOWLEDGEMENT.**  **Credit Card Option:** My signature below authorizes Nexgo, Inc. to use the credit card listed above for the purchase of goods and/or services as indicated on the sales order submitted. I certify that I am the legal cardholder for this credit card, and that I am authorized to enter into this billing agreement with Nexgo.  **Invoice Option:** My signature below confirms an agreement bound by the terms and conditions of the sale and in lieu of a purchase order.  Please fax the signed acknowledgement to 949.266.5658 (Attention: Orders). Orders will not be processed without a signature. For any questions, please contact your Nexgo Sales Manager. | | | | | | | | | | | | | | | | | | |
| Signature: | **X** | | | | | | Print Name: | | | |  | | | | Date: | | |  |

PLEASE RETURN ALL REQUIRED FORMS TO NEXGO VIA FAX OR EMAIL

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