

# Purchase order

## 1 Client informations

### Invoice to

Name	
# client	
<b>EMAIL</b>	
Organisation/Poste	
Adress	
City / Province	
Postal Code	
Phone number	

### Shipped (if different from the invoice address)

Name	
Organisation	
Poste	
Adress	
City / Province	
Postal Code	
Phone number	

## 2 Billing

Visa    MasterCard

Card number

Name on the card

Expiry (MM/AA)

Security Code

Signature

Check Payable to IRP  
This option is **only** available for institutions that have a purchase order number

## 3 Order

Quantity	No. Products	Description	Unit price	Total price

## 4 Handling and shipping costs

9% of the order price (minimum \$ 15)

Sub-total	\$	
Costs	+	
Taxes	+	
Total	\$	

## 5 Transmit the order

Return by **fax** to: 514.382.3007 or 1-888.382.3007

Or by **email** to: info@irpcanada.com

For further information or questions please contact us at: 514.382.3000