| MAR  | RLIN                              | I <b>P.</b> , | JON      | <b>ES &amp;</b> | A      | SSC  | C.              | , IN                        | C.       |
|--|-----------------------------------|---------------|----------|-----------------|--------|------|-----------------|-----------------------------|----------|
| Image: Construct Section 2         FAX Toll Free:         Mail Address:         Order Section 2         Orders:         Orders:< |                                   |               |          |                 |        |      |                 |                             |          |
| SHIPPING INFORMATION   |                                   |               |          |                 |        |      |                 |                             |          |
| NAME DAY PHONE NUMBER:   |                                   |               |          |                 |        |      | For Faster      |                             |          |
| COMPANY  |                                   |               |          |                 |        |      | Service         |                             |          |
| ADDRESS O  |                                   |               |          |                 |        |      | rder ONLINE     |                             |          |
| CITY STATE ZIP: WW   |                                   |               |          |                 |        |      | w.mpja.com      |                             |          |
|  |                                   |               |          |                 |        | Se   | cure SSL site!! |                             |          |
| PAYMENT INFORMATION  |                                   |               |          |                 |        |      |                 |                             |          |
|  |                                   |               |          |                 |        |      |                 |                             |          |
| American Express Amaster Card VISA Discover Check #  |                                   |               |          |                 |        |      |                 |                             | LINE     |
| CARD NO.   |                                   |               |          | CCID#           | EXP. C | DATE |                 |                             |          |
| NAME ON CARD (PLEASE PRINT)  |                                   |               |          |                 |        |      |                 | M                           | P        |
| SIGNATURE DAY PHONE/FAX:   |                                   |               |          |                 |        |      |                 | J                           |          |
|  |                                   |               | I        |                 |        |      |                 |                             |          |
|  |                                   | PLE           | ASE TYPE | OR PRINT N      | EATL   | Y    |                 |                             |          |
| STOCK #  | STOCK # QTY. PG# PART DESCRIPTION |               |          |                 |        |      | UNIT            | COST                        | TOTAL    |
|  |                                   |               |          |                 |        |      |                 |                             |          |
|  |                                   |               |          |                 |        |      |                 |                             |          |
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|  |                                   |               |          |                 |        |      |                 |                             | <u> </u> |
|  |                                   |               |          |                 |        |      |                 |                             |          |
|  |                                   |               |          |                 |        |      |                 |                             |          |
| ALL ORDERS FOR AIR SHIPMENT MUST RECEIVED BY 3:00<br>PM EASTERN TIME FOR SAME DAY SHIPMENT   |                                   |               |          |                 |        |      | MERC            | CHANDISE<br>TOTAL           |          |
| UPS ground UPS 3 Day UPS 2 Day UPS overnight   |                                   |               |          |                 |        |      |                 | SALES TAX<br>(Florida only) |          |
| Priority Mail  Parcel Post   |                                   |               |          |                 |        |      | SI              | HIPPING &<br>ANDLING        |          |
| <ul> <li>Cancel items not available for immediate shipment.<br/>Ship remaining items</li> </ul>  |                                   |               |          |                 |        |      |                 |                             | <b></b>  |
| Hold order until complete.   |                                   |               |          |                 |        |      |                 | AMOUNT                      | <u> </u> |
| Cancel entire order if any item is unavailable.  |                                   |               |          |                 |        |      |                 | REMITTED                    |          |