CUSTOM CONVERTERS



Custom Con	verter Red	quest						
Name:		Customer Numb	ber:		Telephone: ()	Fax: ()
Title:					E-mail Address:			
Company:					Required Response Date:		Order Date:	Expected Quantity:
Address						rrant auata		dunity.
or P.O. Box: Mail Stop/				—	Customer # (If cu		,	
Suite/Building:					If you're including	ı attachmei	nts, how many pages v	<u>will follow?</u>
City:] Home Address	State:	Zip:	_				
_	I HOITIE AUUTESS	□ Dusilless Auul	less					
Specificatio	ns for Cus	stom Conv	verter er					
POWER REQUIRE	MENTS:		ENCLOSURE:				INTERFACE/API	PLICATION DESCRIPTION:
☐ Interface Powered	☐ DC Powered		☐ Use Existing Enc	losure				
☐ AC Powered	☐ Other:		☐ Rack Size					
			☐ Custom Dimensi	ions				
CONNECTOR INT	ERFACE:		☐ Custom Mountin	ıg Requir	ements			
□ DTE	□ DCE		☐ Custom Faceplate					
ODEED.			☐ Other (Explain):				MODIFICATION	
SPEED:	□ 4000 has		ENVIRONMENT	٠٨١٠			MODIFICATION:	
□ 300 bps □ 1200 bps	□ 4800 bps □ 9600 bps		☐ Custom Enclosur					sting Black Box product?
□ 1200 bps	☐ 9600 bps		☐ Custom Tempera		uiromante			
□ 2400 bp3	□ Other:		(Specify in space		junomonio		would with a second	
CLOCK SOURCE:			(1)	,				
☐ Sync	☐ Async		CONNECTORS:					
			□ DB25	□R	J-45			
			□ DB37	□ 0 ¹	ther:			
Application D	ianram							
Provide a sketch.	lagraili							
T TOVIGO G OKOLOTI.								
	ordering, plea					Th	ank	vou/
form t	o our Order F	orm on the n	ext page.			111	ank	you:

COPY AND FAX THIS FORM

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Order Form

☐ Request for Quote Only

4 Easy Ways to Order: 1. Phone	3. On-Line 4. Mail					
2. Fax						
Please print						
Billing Address:	Shipping Address (if different than Billing Address:)					
Name:	Name:					
Title:	Title:					
Company:	Company:					
Purchase Order No.:	Purchase Order No.:					
Address or P.O. Box:	Address or P.O. Box:					
Mail Stop/Suite/Building:	Mail Stop/Suite/Building:					
City: State: Zip:	City: State: Zip:					
☐ Home Address ☐ Business Address	☐ Home Address ☐ Business Address					
Telephone: () Fax: ()						
E-mail:						
Shipping Instructions:	Shipping Instructions:					
	Subtotal					
Payment Options	Shipping *					
☐ Bill My Existing Account: Cust. No.: ☐ Check Enclosed ☐ Other:	PA Customers: Add 6% sales tax to Subtotal and Shipping.					
☐ Charge My Credit Card (all major credit cards accepted):	Total Order					
Cardholder's Name:						
	Credit Card Type:					
Address or P.O. Box: City: State:	Zip:					

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