

Market Study Order Form



First Name: _____

Last Name: _____

Title: _____

Company: _____

Industry: electronics aerospace manufacturing

other _____

Address 1: _____

Address 2: _____

City: _____

State: _____ ZIP: _____

Phone: _____

Email: _____

Report #: _____

Report Title: _____

**Payment
Method:**

Check Credit Card Electronic Transfer

Credit card #: _____ - _____ - _____ - _____

Expiration date: ____ / ____ / ____

Name on card: _____

Signature: _____

If paying by check, please make check payable to: **Thintri, Inc.**

Mail a copy of your order and your payment (or payment information) to:

Thintri, Inc.
25-107 Barker Street
Mount Kisco, New York 10549

For **electronic transfers** or If you have additional questions, please call: **(914) 242-4615**

You may also fax this order form to: **(914) 666-4114**

Reports will be mailed upon processing of payment.