

PLEASE FILL OUT THE FOLLOWING INFORMATION

COMPANY NAME: _____
 YOUR NAME: _____
 EMAIL: _____
 TELEPHONE: _____
 ADDRESS: _____

Send to: CS@cartridge-network.net

SAMPLE LIST		BOX GRADE SCALE						TOTAL
BRAND	PART NUMBER	<u>A</u> Perfect	<u>B</u> Minor defect	<u>C</u> Moderate defects	<u>D</u> Open box Sealed bag	<u>E</u> Sealed bag No box	<u>F</u> No bag No box	
HP	C4127X	1	1	2				4
BROTHER	TN-450		2		3			5
CANON	FX3	1						1
XEROX	106R01215	3	2			1		6
TOTAL		5	5	2	3	1	0	16

YOUR LIST		BOX GRADE SCALE						TOTAL
BRAND	PART NUMBER	<u>A</u> Perfect	<u>B</u> Minor defect	<u>C</u> Moderate defects	<u>D</u> Open box Sealed bag	<u>E</u> Sealed bag No box	<u>F</u> No bag No box	
								0
								0
								0
								0
								0
								0
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								0
								0
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								0
								0
								0
								0
								0
TOTAL		0	0	0	0	0	0	0