



**Sullivan**  
**Palatek**

**SE SMARTEQUIP®**

**Company Name**

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Account Number

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Telephone

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Fax

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**Ship To:**

Company

---

Address 1

---

Address 2

---

City

---

State/Provence

Postal Code

---

**Bill To:**

Company

---

Address 1

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Address 2

---

City

---

State/Provence Accounting

Postal Code

---

Contact Name Accounting

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Contact Email

---

First Name

Last Name

---

Email Address

---

Company Administrator Role

Please return to Kelly Frank at [kfrank@palatek.com](mailto:kfrank@palatek.com)