



Vutec Corporation
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LITERATURE REQUISITION

Company Name _____
 Address _____
 City _____
 State _____ Zip Code _____
 Contact Name _____
 Telephone _____
 E-Mail _____

Ship To

Company Name _____
 Address _____
 City _____
 State _____ Zip Code _____
 Contact Name _____

Select one of the following: Dealer Distributor Sales Rep End User

Select one of the following: Commercial A/V Integrator Home Theater

Non-Vutec Dealer Vutec Dealer Vutec Account # _____

Quantity Requested	Description	Quantity Sent
	Vutec Binder	
	Vutec Catalog	
	Vutec Brochure	
	Vutec Price Book	
	Vision X Catalog	
	Vision X Brochure	
	Vision X Price Book	
	Vision XFT Brochure	
	SilverStar Brochure	
	SilverStar Sample 8" x 10"	
	ArtScreen Catalog	
	ArtScreen Brochure	

Quantity Requested	Description	Quantity Sent
	Retracta-Vu Pro Brochure	
	PrismaTec Brochure	
	PrismaTec Sample 8" x 10"	
	A/V Catalog	
	A/V Price Book	
	Litegard Catalog	
	Cable-Mgr. Catalog	
	Pro-10 Brochure	
	M.E.2 Brochure	
	Screen Fabric Swatches	
	Screen Sample Booklet	

FOR OFFICE USE ONLY

Requested By _____	Approved By _____	Date _____
Date Shipped _____	Copy To _____	