



**CogScreen, LLC**  
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# ORDER FORM

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Purchase Order No. \_\_\_\_\_

## Shipping Address:

Customer Name: \_\_\_\_\_  
 Address Line 1: \_\_\_\_\_  
 Address Line 2: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

## Billing Address:

Customer Name: \_\_\_\_\_  
 Address Line 1: \_\_\_\_\_  
 Address Line 2: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_

Check here if billing address is same as shipping address.

Description	Quantity	Unit Price	Cost
<b>License Set: CD-ROM and 5 Test</b>		<b>\$850.00</b>	
<b>1-10 Test Administrations</b>		<b>\$35.00 each</b>	
<b>11-99 Test Administrations</b>		<b>\$32.50 each</b>	
<b>100+ Test Administrations</b>		<b>\$30.00 each</b>	
<b>Additional License Sets (2-5 licenses)</b>		<b>\$650.00 each</b>	
<b>ELO Model 1522L LCD Touchscreen</b>		<b>\$559.00</b>	
<b>Mini PC Configured for CogScreen</b> (refurbished/recertified Win XP laptops and desktops also available)		<b>Call for Pricing</b>	
<b>Method of Payment:</b> <b>Payment required in advance. Please circle below.</b> • Visa                      • Mastercard                      • Purchase Order • American Express                      • Check or Money Order Card#: _____ Security Code #: _____ Expiration Date: _____ / _____ Cardholder Name: _____ Signature _____	<b>Subtotal</b>		
	<b>Sales Tax:</b> (7%- Florida Customers Only)		
	<b>Shipping:</b> We bill actual FedEx Shipping Charge (No Charge for Test Admins or Touchscreen)		
	<b>Total: (U.S.D)</b>		
	<b>Special Instructions:</b>		

I understand the elements of testing essential to the appropriate use of standardized tests, and I have personal knowledge of professional testing standards (such as the APA-AERA-NCME Standards for Educational and Psychological Tests, 1985). I further warrant that I possess the appropriate training and competencies to use the assessment materials and services I seek to purchase. I agree that my use of such materials will adhere to applicable local and national laws and regulations and the ethical principles of my profession. I assume full responsibility for the proper use of the assessment material I order from CogScreen, LLC.

Signature \_\_\_\_\_

Date \_\_\_\_\_