

5601 Green Valley Drive
Bloomington, MN 55437
USA
Business hours:
8:30 am - 17:00 pm CET

Telephone: +44 161 855 7459 | Fax: +44(0) 207 681 2005
Email: PearsonVUEVoucherStore@pearson.com

Site ID: *Order Date:

IMPORTANT

Please fill out this order form in its entirety. Click the "Submit" button to send your voucher order directly to Pearson VUE. For a copy of this order, click the "Print Form" button. Once submitted, you will not be able to retrieve this information.

We accept VISA, Mastercard, AMEX, and money transfers.

Vouchers are issued after payment is processed.

Your order will be processed within 2 business days from the time of submission. Payment approval may take an additional 2 business days from the time the order is processed. Vouchers are not created until payment has been approved.

Payment by credit card is the fastest way to receive your vouchers. All other payment methods will take more than 2 business days to approve payment and issue your vouchers.

Vouchers expire 12 months from the date of purchase and are non-refundable.

Bill To:

This is my first voucher order with Pearson VUE.

*Company:

*Name:

*Email:

*Country:

*VAT ID:

*Full Address:

*Phone:

Ship To: Same as 'Bill To'

Vouchers are only delivered via email to the email address below:

Company:

Name:

Email:

Country:

Full Address:

Phone:

Fax:

Required for CompTIA Member/Partner voucher orders only:

CompTIA Member/Partner #: Member/Partner Last Name:

Membership and/or Company voucher-specific notes, if applicable:

Visit pearsonvue.com/vouchers/pricelist/comptia.asp for current pricing.

| QTY | Exam Type | Member Level | Unit Price | Total |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
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Appropriate VAT, if applicable, will be added to Total Due. *Currency: TOTAL DUE:

METHOD OF PAYMENT

*Payment Type: AMEX MasterCard VISA Bank Transfer Other

Cardholder's Authorized Name: as shown on the credit card

Card Number: Exp Date:

Cardholder's Address:

Purchase Order #: *If paying with a Line of Credit, please send the voucher store a completed order form, along with a copy of your PO.*

*I authorize Pearson VUE to charge this account with the "Total Due": Yes No

***Authorized Purchaser Signature:**

*Print your copy before submitting, as document is not saved.
Vouchers will be sent to email address in the Ship To field.*