



**Marshall Robinson  
& Associates, Inc.**

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## 2021 MOBILITY CART ORDER FORM

PLEASE PRINT OR TYPE INFORMATION

Name _____		Credit Card # _____	
Company Name _____		Exp. Date _____	Sec. Code _____
Billing Address _____			
City _____		Email _____	
State _____	Zip Code _____		
Phone # _____		<input type="checkbox"/> Returning Nightly <input type="checkbox"/> Keeping Overnight	

Pick Up Day & Date	Return Day & Date
# of Days X \$40.00 <b>Sub Total</b>	
5% Handling Fee	
<b>TOTAL</b>	

Signature \_\_\_\_\_

Payment in full must accompany this order form. Marshall Robinson & Associates accepts cash, checks, Visa, MasterCard, Discover & American Express. There will be a 5% Handling Fee for non cash orders.  
**Cancellations require a 6 day advance notice in order to receive any refund of amounts rendered.**

Notes: \_\_\_\_\_  
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