



TRANSCRIPT Order Form



TOLL FREE
Phone: 1-888-881-8318
Fax: 1-888-881-8319

PRICE LIST AND PAYMENT INFORMATION

PLEASE NOTE: A WRITTEN PURCHASE ORDER OR A LETTER ON SCHOOL STATIONARY MUST ACCOMPANY YOUR ORDER. WE WILL NOT SELL TO INDIVIDUALS.

_____ Packs @ \$16.25 per pack of 250 sheets (8.5 x 11) = \$_____ + Shipping **{ IF PAYING BY CHECK, PLEASE CALL FOR SHIPPING CHARGE. }**

Color Maroon
 Blue

This order form can be faxed to our secured location. It must include your credit card number for payment or it can be mailed along with a check for the proper amount to the address below.

Credit Card # _____ / _____ / _____ / _____

CVV # _____

Card Type

Expiration Date _____ / _____
MM / YY

(3 Digits on Reverse Side of Card)

Credit Card Billing Address and Zip Code **(Numbers Only)**

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Address

--	--	--	--	--	--

Zip

Check # _____

Name of Person Placing Order _____
Please Print

Institution Name _____

Ship To Address _____

City, State, Zip _____

Phone Number _____ Fax Number _____

PLEASE CHECK YOUR ORDER CAREFULLY TO MAKE SURE THAT ALL INFORMATION IS CORRECT, ALL ITEMS ARE CHECKED AND/OR ALL FILLED IN. INCOMPLETE ORDERS WILL RESULT IN DELAYS.

ORDER FORM PAGE 1 of 1

09-13-10