



{customer info}

Company Name: _____ Date: _____

Buyer's Name: _____ P.O. #: _____

Existing Account: Y / N

If no, then please record your company info below.

Phone: _____ Fax: _____ Email: _____ Resale Number: _____
Michigan dealers only

Preferred Method of Shipping: USPS Priority Mail USPS Media Mail UPS Ground

Shipping Address: _____ Billing Address: _____
If different than shipping



{payment info}

Terms : Payment Enclosed Net 30 Days (existing accounts only) Net 90 Days (approved wholesalers only)

Method of payment: Check Credit Card

Credit Card info:

Card Type: Visa Mastercard Discover American Express Expiration Date: _____

Name of Cardholder: _____ Card Number : _____

3 Digit Verification Number: _____
4 digit for American Express



{order specs}

ISBN and Title Desired: _____ Quantity: _____

ISBN and Title Desired: _____ Quantity: _____

ISBN and Title Desired: _____ Quantity: _____

ISBN and Title Desired: _____ Quantity: _____

Non-Returnable / Returnable (must be approved)

Total Discount: _____