

Woodburn Press

College Order Form

Ship to / Bill to

Name: _____
 Title/Dept: _____
 Institution: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: (_____) _____ Email: _____

Bill to (if different)

Name: _____
 Title/Dept: _____
 Institution: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____

Decision Maker's Name and Title (if different) _____

Item #	Title	Quantity	Unit Price	Total

Payment Information

Payment Enclosed Bill me. PO # _____
 Visa MC AmEx
 Card # _____
 Exp. Date _____ Security Code _____

Shipping & Handling
 9% of subtotal
 \$8 minimum

Subtotal = \$ _____

Add Shipping + \$ _____

Total = \$ _____

Special Instructions / Date Needed _____

For information on all our products, visit us at woodburnpress.com.

Five Ways to Order **Phone:** 888-285-1502 **Fax:** 888-818-0711 **Online:** woodburnpress.com
Mail: Woodburn Press • 405 Littell Ave • Dayton, OH 45419 **Email:** orders@woodburnpress.com