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School/Dept.                    School E-Mail Address                  School Fax Number

Address                              Personal E-mail

City, State, Zip Code (Area Code) School Phone (Area Code) Home Phone

Shipping If Different Than Above

Name (Please Print or Type)                  School/Dept.                  Phone

Address                              City, State, Zip Code (Area Code) Cell Phone

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[ ] Purchase Order                  Purchase Order No. (Required)                  Authorized Signature

[ ] Check                  Check No.                  Authorized Signature

[ ] Credit Card: Visa, MasterCard, American Express                  No.                  Authorized Signature

Exp. Date: _________________________________

Order Minimums: Domestic $30 + Shipping • Canadian $100 + Shipping • Foreign: $150 + Shipping

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Sub-Total

Applicable Sales Tax Not Applicable to Public Schools

Shipping Charges

Grand Total

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