

Year-End ORDER FORM

TOLL-FREE 1-800-238-3253 • FAX (901) 680-5343

Item #	Title/Description	Check Imprint Location				Quantity	Unit Cost	Total Cost
		Front	Back	Both	None			
8024	Giving Thanks at Year-End (Bread)							
8144	Giving Before December 31 (Candle)							
8145	The Spirit of Giving (Bells)							
8447	Generosity at Year-End (Heart)							
8448	The Time for Giving (Clock)							

Imprinting Fee **INCLUDED**

SUBTOTAL _____

Plus Shipping _____

GRAND TOTAL _____

QUANTITY PRICING

Price

Minimum	1,000 - 1,999	.....	\$.445 each
	2,000 - 2,999	.....	\$.335 each
	3,000 - 4,999	.....	\$.320 each
	5,000 - 7,999	.....	\$.250 each
	8,000 - 11,999	.....	\$.210 each
	12,000 - 16,999	.....	\$.170 each
	17,000 - 24,999	.....	\$.160 each
	25,000 or more	.....	Ask for quote

Prices based on total quantity of brochures ordered. Titles may be combined for quantity pricing.

IMPRINTING INFORMATION

Imprint FeeIncluded

Use imprint on file New imprint

Publications will be imprinted in black. Five lines maximum. Logos and text for new imprints may be sent to imprints@sharpenet.com. For more information, visit www.sharpenet.com/pubs/art.

SHIPPING & HANDLING

Total Order Amount Shipping & Handling Fee*

\$100.00 to 249.99	.....	\$15.00
250.00 to 499.99	.....	21.00
500.00 to 749.99	.....	27.50
750.00 to 999.99	.....	35.00

Prices shown are for shipment in continental U.S. Additional charges may apply for shipments elsewhere. Orders are shipped via FedEx Ground® unless another method is requested.

*Shipping prices are subject to increase if carrier fees increase.

Orders over \$1,000: Rates will be determined based on method of shipment.

Publication orders shipped to California addresses may be subject to CA Use Tax. Please add use tax appropriate to the California county in which delivery is taken. Questions about CA Use Tax, please call 1-800-238-3253, ext. 5306.

METHOD OF PAYMENT

Please bill me. Enclosed is a check for \$ _____.

Please charge my: Mastercard Visa AmEx

Card # _____ Exp. date _____

Name on card _____

Signature _____

BILLING ADDRESS

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

E-mail _____

Phone () _____

Fax () _____

Purchase order # (optional) _____

SHIPPING ADDRESS

(If different from billing. No P.O. boxes, please.)

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip _____

Phone () _____



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