



Person Placing Order: _____
 Daytime Phone: (_____) _____
 E-mail Address: _____

Credit Card # _____
 Ex. Date _____
 Cardholder's Name: _____
 Cardholder's Address: _____
 Cardholder's Signature: _____

BILL TO: (All orders subject to credit approval.)
 Purchase Order #: _____
 GPH charge Account #: _____
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____

SHIP TO: (Street address necessary for UPS and truck orders.)
 Ship to arrive by: _____
 Name: _____
(IF DIFFERENT FROM BILLING ADDRESS)
 Address: _____
 City: _____ State: _____ Zip: _____



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Item Number	Item	Retail	Qty Order	Sale Price	Total
990-300	CMA Lead Soft Cover CD Case with ALL 3 RE:gional General Session CDs	\$ 34.00		\$ 20.00	
TOTAL					

SHIPPING AND HANDLING	
SALES TAX (WHERE APPLICABLE)	
GRAND TOTAL	

Payment Method: (Please Check one)	<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> GPH Account
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