



# PRODUCT ORDER FORM



### Billing Address:

Name \_\_\_\_\_ Profession \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Company Address \_\_\_\_\_  
 Company Address 2 \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail address \_\_\_\_\_

Thank you for your order!

Please fax your order (and tax-exempt certificate, if applicable) to:

**1-800-554-9775**

Or mail your order (and tax-exempt certificate, if applicable) to:

**CMI Education**  
**Attn: Order Entry**  
**PO BOX 1000**  
**Eau Claire, WI 54702**

*Please note: Confirmation/receipts are sent only via e-mail.*

### For office use only:

Check #: \_\_\_\_\_

Order #: \_\_\_\_\_

### Shipping Address (if different from above):

Company Address \_\_\_\_\_  
 Company Address 2 \_\_\_\_\_  
 City \_\_\_\_\_ County \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_

### Product Order:

Qty	Item Number	Title	Price	Total

### Payment Information:

Mail Code: \_\_\_\_\_

Check     Master Card     Visa     Am Express     Discover

Card Number \_\_\_\_\_

Exp Date \_\_\_\_\_ V Code \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Tax-Exempt ID# (if applicable): \_\_\_\_\_

Product total \$ \_\_\_\_\_

\*Shipping \_\_\_\_\_

Subtotal \_\_\_\_\_

\*\*Tax \_\_\_\_\_

**TOTAL \$** \_\_\_\_\_

\*Shipping is \$6.95 first item + \$2.00 each add'l item.

\*\*AL, AZ, AR, CA, CO, CT, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NV, NJ, NM, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WASHINGTON DC, WV, WI, WY residents add applicable state and local taxes.

If you are a tax-exempt organization, please provide us with your tax-exempt ID # and attach a copy of your tax-exempt certificate with this order.

\*If you have any questions about a product or are ordering more than 4 items, please call our Customer Service department at 1-800-844-8260