Northern Illinois University Press — Order Form

BILL TO:

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

E-mail _____

Purchase Order # _____

SHIP TO:

(IF DIFFERENT FROM BILL TO ADDRESS)

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

Title	Qty.	Total Amount
TOTAL NUMBER OF BOOKS ORDERED		
Illinois residents add 8.0% sales tax		
Postage and handling—$6.00 first book		$6.00
$1.50 each additional book		
Subtotal		
TOTAL AMOUNT ENCLOSED		

Method of Payment : ❑ Check or money order (in US Dollars) ❑ MasterCard ❑ Visa

Card # _____ Exp. Date _____

Signature of Cardholder _____

Northern Illinois University Press

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