



A2Z Educational Supplies
SPECIALIZING IN ALL YOUR EDUCATIONAL NEEDS!

9603 Cypress Creek Parkway
Houston, TX 77070
(281) 890-6615

Shop Online: www.a2zedsupplies.com
Email: db@a2zedsupplies.com

ORDER FORM

PURCHASE ORDER NO.

DATE

____ / ____ / ____

BILL TO: _____ **ATTENTION TO:** _____
STREET: _____ CITY: _____ STATE: _____ ZIP: _____
PHONE#: (_____) _____ FAX#: (_____) _____ EMAIL: _____

SHIP TO: _____ **ATTENTION TO:** _____
STREET: _____ CITY: _____ STATE: _____ ZIP: _____
PHONE#: (_____) _____ FAX#: (_____) _____ EMAIL: _____

ORDER NEEDED (Date): ____ / ____ / ____ AUTHORIZED BY: _____

ORDERING INFORMATION

PRICES • Prices stated are FOB our plants except where otherwise noted. **All prices are subject to change because of possible manufacturer price increases.** In the event of a significant price increase, we will notify you before processing your order.

TERMS • Net 30 days to schools and other authorized institutions. Payment must accompany orders from individuals.

SHIPPING CHARGES

- Minimum shipping and handling charge is \$8.95. Actual shipping charges will apply.
- Overseas shipments subject to actual rates.
- When weight and/or or FedEx is indicated for a product, additional shipping charges may apply, please call for confirmation.
- When is indicated for a product, actual shipping charges will apply, please call for a quote.

RETURNS • Return authorization required for all returns; please provide invoice number when making request. A restocking fee may apply. All product being returned must be in its original packaging and in saleable condition.

| PRODUCT ITEM NO. | CATALOG PG. NO. | PRODUCT NAME/DESCRIPTION <i>(Title, Color, Size)</i> | QTY. | UNIT COST | EXTENDED COST <i>(Quantity X Unit)</i> |
|------------------|-----------------|---|------|-----------|---|
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PAYMENT METHOD

PURCHASE ORDER CHECK OR MONEY ORDER \$ _____
Amount Check or Money Order# _____

CREDIT CARD: MASTERCARD VISA AMERICAN EXPRESS DISCOVER

FOR OUT-OF-STOCK ITEMS, PLEASE:
 Cancel item.
 Substitute comparable item.
 Backorder and send when available.

NAME ON CARD _____
(Please print clearly): _____ CVC Number (3 digits on back of card) _____

CARD NO. _____

| | |
|---|-------|
| TOTAL THIS SIDE: | _____ |
| TOTAL OTHER SIDE: | _____ |
| TOTAL ORDER: | _____ |
| SALES TAX: (if Applicable) | _____ |
| SHIPPING CHARGES: (See Shipping Charges) | _____ |
| TOTAL DUE: | _____ |

Expiration Date _____

Authorized Signature (required for purchase orders or credit charge) _____

THANK YOU FOR YOUR ORDER!