

Supply Order Form

Registration number: _____ Change of address or phone number since your last order? <input type="checkbox"/> No <input type="checkbox"/> Yes	 212 Cottage Grove Ave, Ste. A Santa Barbara, CA 93101 Toll Free: 1-800-533-1388 Local: 805-568-0240	<i>Please Print Legibly</i> Fax the Completed Form to: (800) 542-8520
--	---	---

BILLING ADDRESS:			SHIPPING ADDRESS (No PO Box):		
Attention:			Attention:		
Company:			Company:		
Address:		Ste:	Address:		Ste:
City:	State:	Zip:	City:	State:	Zip:
Billing Phone:		Ext:	Shipping Phone:		Ext:

DESCRIPTION	Green	Burg	Blue	Grey	# PER UNIT	UNIT PRICE	# OF UNITS	TOTAL
Single Window Summary Style Statement – Please note: The paper in this style is pre-printed on one side								
Summary Report Covers w/ die-cut				N/A	100	\$40.00		
Summary Statement Paper (bordered/scored) 8 1/2"x14"				N/A	100	\$28.00		
Windowed Envelopes for Summary Covers	<i>White envelopes only.</i>				50	\$19.50		
Double Window Summary Style Statement - Note: Long arm or saddle stitch stapler is needed for assembly of this style								
Summary Report Covers w/ double die-cut					100	\$40.00		
Summary Statement Paper (blank/scored) 8 1/2"x14"	<i>White, blank paper only.</i>				100	\$14.00		
Double Windowed Envelopes for Summary Covers	<i>White envelopes only.</i>				50	\$16.00		
Booklet Style Statement - Note: Long arm or saddle stitch stapler is needed for assembly of this style								
Booklet Report Covers w/ double die-cut*		N/A		N/A	100	\$34.00		
Booklet Statement Paper (Blank/scored) 8 1/2" x 11"	<i>White, blank paper only.</i>				250	\$25.00		
Windowed Envelopes for Booklet Covers	<i>White envelopes only</i>				100	\$24.00		
Portfolio Style Statement								
Portfolio Report Covers w/ die-cut				N/A	50	\$ 65.00		
Portfolio Statement Paper (bordered/scored) 8 1/2"x11"				N/A	250	\$ 25.00		

To view images of our supplies or download another order form, please visit www.bsiweb.com/forms.

(1) SUBTOTAL:		\$
(2) ADJUSTMENTS:		\$
(3) ADJUSTED SUBTOTAL:		\$
(4) SALES TAX- CA 8.75%		\$
(5) SHIPPING & HANDLING		\$
(6) TOTAL (U.S. DOLLARS)		\$

PAYMENT METHOD: <i>Please Note: We only accept Visa, MasterCard, and American Express.</i> <input type="checkbox"/> Check <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express Credit Card Number: _____ Expiration Date: _____ <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> <div style="border: 1px solid black; width: 30px; height: 20px;"></div> </div> Authorized Signature (Required on all Credit Card Orders): X _____ Print name exactly as it appears on card: _____ Billing Address for Credit Card Orders: *If different from above* Street: _____ City: _____ State: _____ Zip: _____ These rates apply only to shipments within the 48 contiguous states. Call for other areas. <p style="text-align: center; color: red;">Please Note: No Returns or Exchanges</p>	*SHIPPING & HANDLING (select method below) <input type="checkbox"/> UPS Ground 10% of line 1; Min \$10.00 <input type="checkbox"/> UPS 3 Day Select 10% of line 1 + \$20.00 <input type="checkbox"/> UPS 2 nd Day Air 15% of line 1 + \$40.00 <input type="checkbox"/> UPS Next Day Air 20% of line 1 + \$50.00 Or <input type="checkbox"/> Bill My UPS Account - Handling Fee \$10.00 <input type="checkbox"/> Ground <input type="checkbox"/> 3 Day Select <input type="checkbox"/> 2 Day Air <input type="checkbox"/> Next Day Air AM <input type="checkbox"/> Next Day Air UPS Account # _____ Or <input type="checkbox"/> Bill My Fed-Ex Account - Handling Fee \$10.00 <input type="checkbox"/> Ground <input type="checkbox"/> Express Saver (3 day) <input type="checkbox"/> 2 Day <input type="checkbox"/> Standard Overnight <input type="checkbox"/> Priority Overnight FedEx Account # _____ <p style="text-align: center; color: blue;">*Orders received after 1:00pm (PST) will ship the next business day*</p>
---	---

Order Date	Order #	Check/Card Auth #	Sales Rep	Res/Ref #	Source	Type	SIC Code	Entered By	Packed By
------------	---------	-------------------	-----------	-----------	--------	------	----------	------------	-----------