

Preferred Educational Software Order Form

| Qty | Name of Product | Unit Price | Total Price |
|-----|-----------------|------------|-------------|
| | | | |
| | | | |
| | | | |
| | | | |

Preferred Educational Software
 221 Rivers Edge Drive
 Cherry Valley IL 61016

 Toll Free (888) 959-2016
 FAX (815) 332-1639

Shipping
 Next Day \$35.00
 2nd Day \$25.00
 1st Class Mail \$7.00

 All Next Day / 2nd Day orders
 should have a physical address
No PO boxes

| | |
|--|--|
| SubTotal | |
| Shipping | |
| Sales Tax IL residents add 7.75% Sales Tax | |
| Total | |

Purchase Order # _____

Please FAX or Attach School Purchase Order if not paying by check or credit card

Credit Card: VISA, MASTERCARD or DISCOVER

Name on Card _____

Card # _____ Expiration Date _____

Please print clearly or your order may be delayed!

Please specify a Home or School shipping address below!

School Shipping Address

Name _____

School _____

School Shipping Address _____

All Next Day / 2nd Day
orders should have a
physical address
No PO boxes

City _____ State _____ Zip _____

School Phone _____ Home Phone _____

Home Shipping Address

Name _____

Home Shipping Address _____

All Next Day / 2nd Day
orders should have a
physical address
No PO boxes

City _____ State _____ Zip _____

School Phone _____ Home Phone _____

Please print clearly or your order may be delayed!