FACULTY ORDER FORM FOR

EDUCATIONAL SUPPLIES AND EQUIPMENT

COMPANY: (use separate form for each company)

Name:_____ Phone No._____

Address: _____ or Toll-free No. _____

_____

_____

CATALOG:

Include most recent catalog – if not recent, send or call and request as prices change

ITEMS TO BE ORDERED:

Catalog #	Page #	Quantity	Description of Item	Price Each	Total Amount

Subtotal: _____

Cost of shipping/handling: _____

TOTAL: _____

Purpose of this order (course related, etc):

Faculty Member Placing the order:

_____

Signature