



Mail: ETA/Cuisenaire®
 500 Greenview Court
 Vernon Hills, IL 60061-1862
FOUR EASY WAYS TO ORDER
Tel: 800-445-5985
Fax: 800-ETA-9326
Online: www.eta-cuisenaire.com

Date	Purchase Order #	ETA/Cuisenaire Account # (if known)
Source Code (found on the back cover)		<input type="radio"/> Taxable <input type="radio"/> Tax Exempt * See below for sales tax guidelines.

SHIP TO: (Be sure to give street address—UPS cannot deliver to a P.O. Box)

School/
Institution: _____

Name: _____
 DR. MS. MRS. MR. First Name Last Name

Title: _____

Street: _____

City: _____

County: _____ State: _____ Zip: _____ - _____

Country: _____

Tel: _____ Fax: _____

E-mail: _____

BILL TO: (Please type or print clearly)

School/
Institution: _____

Name: _____
 DR. MS. MRS. MR. First Name Last Name

Title: _____

Street: _____

City: _____

County: _____ State: _____ Zip: _____ - _____

Country: _____

Tel: _____ Fax: _____

E-mail*: _____

Principal or Purchasing Agent Signature: _____

*E-mail address is required to check order status online.

Quantity	Item #	Product Description	Price	Total

All individual orders must be accompanied by payment via check or credit card.

* SALES TAX: Orders in the following states must include sales tax unless a tax exemption or resale tax certificate is provided or on file: AZ, CA, CO, CT, DC, FL, GA, ID, IL, IN, IA, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, NE, NJ, NM, NV, NY, OH, PA, RI, SC, SD, TN, TX, UT, VA, VT, WA, WI, WV, and WY. State laws in CO, CT, DC, FL, GA, IN, KS, MA, MI, MO, MS, NC, NE, NM, NV, NY, PA, RI, SC, SD, TN, TX, UT, VA, WI, WV, and WY mandate that sales tax be calculated on both merchandise and freight.

† SHIPPING CHARGES: All orders from individuals must be accompanied by payment or credit card information and should include 10% for shipping and handling charges within the contiguous United States, or 20% for shipping charges outside the contiguous U.S. Actual shipping charges will apply if they exceed 20%. Please add \$5.00 for shipping and handling on orders under \$25.00.

	Total Cost of Merchandise
	*Applicable Sales Tax
	†Shipping Charges
	TOTAL

Check Enclosed Visa MasterCard American Express Discover

Card #: _____ Expiration Date: _____

Signature: _____

This order form may be reproduced.