

INTERNAL USE ONLY:

CODE: _____

RECV'D BY: _____

DATE: _____

Shipping Form C

SS SBYB: Additional Orders

This form MUST accompany your additional orders.

Organization Information: *Please complete all information*

Organization:		School Code:
Address:		
City	State:	Zip:
Contact:	Phone:	
Weekdays you will be closed:		# Artworks sent:

Billing Options:

Original Works will provide free shipping & handling for the first shipment of additional orders. All subsequent additional order shipments will be subject to a \$10.00 shipping & handling fee.

If your school or organization requires a **Purchase Order** to be issued to Original Works please provide: *PO #: _____

Please select one:

- Send Profit Check.** We are sending 100% of the money collected and will receive our profit check within 10 business days of order processing. **Please make check payable to: Original Works * Check #: _____ Check Amount: \$ _____**
- Exact payment.** We have tallied all of our orders and are sending in the exact amount. The tally will be confirmed by Original Works. **Please make check payable to: Original Works * Check #: _____ Check Amount: \$ _____**
- Invoice.** Please tally all orders then send us a final invoice. We understand that payment of the invoice is due in full upon receipt. * **Please email invoice to: _____ or fax to: _____**

Orders: *Please submit original artwork and order form for any artwork that is not on file. One order form per artwork. Use this section if ordering more products from a previously processed artwork. You do NOT need to resubmit the artwork for these orders.*

Additional Preview Magnets sold: _____

Order Form #:	Artwork Description:	
Is artwork (<i>choose one</i>)	<input type="checkbox"/> Vertical (portrait) or	<input type="checkbox"/> Horizontal (landscape)
Product:	Product:	Product:
Order Form #:	Artwork Description:	
Is artwork (<i>choose one</i>)	<input type="checkbox"/> Vertical (portrait) or	<input type="checkbox"/> Horizontal (landscape)
Product:	Product:	Product:
Order Form #:	Artwork Description:	
Is artwork (<i>choose one</i>)	<input type="checkbox"/> Vertical (portrait) or	<input type="checkbox"/> Horizontal (landscape)
Product:	Product:	Product:
Order Form #:	Artwork Description:	
Is artwork (<i>choose one</i>)	<input type="checkbox"/> Vertical (portrait) or	<input type="checkbox"/> Horizontal (landscape)
Product:	Product:	Product:

Send to: ORIGINAL WORKS

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