**Shipping Form C**

**INTERNAL USE ONLY:**CODE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
RECV’D BY: \_\_\_\_\_\_\_\_\_\_\_
DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preview Magnet Program | Additional/Late Orders

***Include this form with your additional orders.***

# School/Organization Information:

|  |  |
| --- | --- |
| School/Organization: | School Account Code: |
| Address: |
| City: | State | Zip: |
| Contact | Phone #: |
| Weekdays you will be closed: | # of Artworks sent: |

# Orders: Please submit original artwork and order form for artwork that is not on file. One order form per artwork.

**Additional Preview Magnets sold: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Use the section below when ordering more products from a previously processed artwork from your current program. You do NOT need to resubmit the artwork for these orders.

|  |  |
| --- | --- |
| Order Form # | Artwork description |
| Is artwork (Choose one) [ ]  Vertical (portrait) or [ ]  Horizontal (landscape) |
| Product | Product | Product |
| Order Form # | Artwork description |
| Is artwork (Choose one) [ ]  Vertical (portrait) or [ ]  Horizontal (landscape) |
| Product | Product | Product |
| Order Form # | Artwork description |
| Is artwork (Choose one) [ ]  Vertical (portrait) or [ ]  Horizontal (landscape) |
| Product | Product | Product |
| Order Form # | Artwork description |
| Is artwork (Choose one) [ ]  Vertical (portrait) or [ ]  Horizontal (landscape) |
| Product | Product | Product |

# Billing Options: Original Works provides free shipping & handling on the first shipment of additional orders. All subsequent additional shipments will be subject to a $10.00 shipping & handling fee.

\*If your school/organization requires a Purchase Order to be issued to Original Works in order to be invoiced please provide:
 The purchase order # is: \_\_\_\_\_\_\_\_\_\_\_\_ to be referenced on the invoice.

**Please select one of the following options.** Please make all checks payable to Original Works.

***[ ]* Send Profit Check.** We are sending 100% of the money collected and will receive our profit check within 10 business days
 of order processing. **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.  **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:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Send to: ORIGINAL WORKS
54 Caldwell Road • Stillwater, NY 12170 • 800-421-0020 • fax 518-580-0639 • lawfi@originalworks.com**