Delphi Productions

440 Calhoun St. **Port Townsend, WA 98368**
Call our customer service number for questions or add'l information 303-443-2100

ORDER FORM

Bill to: _____
Institution Name

_____
Address

_____
City, State, Zip

_____
Telephone

_____
Requestor's Email

Ship to: _____
Institution Name

_____
Attention

_____
Address

_____
City, State, Zip

_____
Telephone

Save time and **fax** your order to: **(303) 443-4022**
Please send me

Quantity	VHS/DVD	Title	Unit Price	Total

___ Payment enclosed.
Orders from individuals must be prepaid.
We are not able to accept credit cards.

___ Bill my institution.
The purchase order number is _____
An invoice will be sent at the time of shipping.
Payment terms are net 30 days.

Subtotal _____

_____

Previous Customer Discount _____

*Shipping & handling _____

Total _____

* Shipping, handling & insurance charges are:

Minimum	$6.50
Orders from $101 - $500	6% of Total
Orders from $501 - $1,000	4% of Total
Orders from $1001 - $2,000	2% of Total
Orders above $2,001	Free