

Turn in this form to your advisor/coordinator once all of your efforts are completed.

SELLER/FAMILY NAME: _____

Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____	Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____	Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____
Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____	Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____	Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____
Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____	Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____	Book(s) _____ Total Paid _____ Customer _____ Address _____ City, Zip _____ Phone _____ Email _____ Credit Card _____ Expiration _____

Cash, Check (made payable to your group) or Credit Card (MasterCard, Visa or Discover) are accepted for payment. To pay by credit card, CAREFULLY record the exact name as it appears on the credit card, the billing address where they receive their statement, their telephone number, the credit card number and expiration date. If this information is not provided correctly, the credit card can not be processed.