



North Manchester, IN

To help expedite your order, please complete this form and either hand it to the driver or attach it to the top of your box

Date  
 Contact Person  
 Customer Name  
 Address  
 City  
 Phone Number

Account #  
  
 State / Zip  
**PO #**

		Number of Cartons	Number of Envelopes	Number of Items	Lot Number
<b>Periodicals</b>	<u>Standard</u>				
	<u>Custom</u>				
<b>Library Books</b>	<u>Standard</u>				
	<u>Custom</u>				
	<u>DigiCover</u>				
<b>Theses</b>					
<b>Newspapers</b>					
<b>Corrections</b>					
<b>Misc</b>					
	<b>TOTALS</b>	0	0	0	