



ORDER FORM

Ordered By

Payment Method

Name: _____
Company Name: _____
Phone Number: _____
Email Address: _____

Check / Money Order
Credit Card #: _____
Name on Card: _____
Card Type: _____ Exp Date: _____
Purchase Order #: _____

Billing Address

Shipping Address

Attn: _____
Company Name: _____
Street: _____
City: _____
State: _____ ZIP: _____

Attn: _____
Company Name: _____
Street: _____
City: _____
State: _____ ZIP: _____

Billing and shipping address are the same.

Item #	Product Description	Quantity	Total Cost

California state residents please calculate and include 8.25% sales tax with your order. Shipping is not taxable.

Order Subtotal
Tax

Shipping Method

Shipping is based on total items purchased. For standard ground shipments, the first item is \$7.49, and **each** additional **item** is \$4.99. If you prefer, orders can be shipped next day or second day delivery anywhere in the U.S. Second day is \$18.00, and **each** additional **item** is \$15.00. Next day is \$30.00, and **each** additional **item** is \$25.00. Orders ship within 48 hours of approval, and you will receive an email confirmation once your order has shipped. Please calculate your shipping cost below.

For customers paying by check, your order will be expedited as soon as funds are verified. Please indicate your driver's license number, state it was issued in, and date of birth on check.

Shipping
Order Total

Please make checks payable to Medicalcodingbooks.com. Thank you for your order.

Check #:	Order #:	< For Office Use Only
Date:	Date:	