



Customized 6-Year Label (BLUE) Order Form

Free shipping on pre-paid orders! (excludes COD orders and orders shipping outside of the continental U.S.)

Please allow two weeks to receive your labels from the time we receive your order.

①

(SHIPPING INFO)

Company Name _____

Main Contact _____

Shipping Address _____
(no P.O. boxes please)

City _____ State _____ Zip/Postal _____

Telephone _____ Fax _____

Email _____

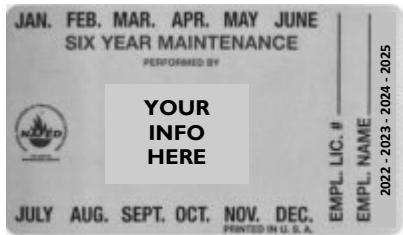
(6-YEAR LABEL / PRINTING INFO)

NAFED member company? yes no

- 1) Check one:
- A) New order—I've never ordered customized 6-Year Labels from NAFED before. **(plate charge incurred)**
 - B) I've ordered customized 6-Year Labels from NAFED before, but I need to make a change. **(plate charge incurred)**
 - C) I've ordered customized 6-Year Labels from NAFED before, and I want them to be exactly the same as last time.

2) Special Instructions _____

②



(picture not accurate for size)

Place current label here OR type or handwrite CLEARLY what you want to appear on your new label. (4 LINES MAXIMUM)

③

Total Quantity Ordered: _____

Internal Use Only					<input type="checkbox"/> Deferred
Date rec'd:	Batch date:	Proof needed?	Y	N	<input type="checkbox"/> Spreadsheet

If you have questions, please contact NAFED at (312) 461-9600. Prices subject to change at any time without notice.



Customized 6-Year Label (BLUE) Order Form

Free shipping!
Offer valid in the continental U.S. only.

Company Name _____

Custom 6-Year Labels (BLUE)	Total Quantity Ordered	Member Price (U.S. Dollars) Per Thousand	Non-Member Price (U.S. Dollars) Per Thousand	Total Price
2,000–4,000		\$99.75	\$111.00	
5,000–9,000		\$95.50	\$107.00	
10,000+		\$93.25	\$103.00	
New or Revised Plate Charge Must add if: 1) first-time NAFED order, OR 2) copy changes are being made to your previous order (i.e. name change, address change)			\$20 per plate	
Set-Up Charge (All orders)			\$15 per order	\$15
			Handling Charge	\$10.95
			Subtotal	
			Illinois companies only—add sales tax (10.25% of Subtotal)	
			Orders shipping outside of the continental U.S.—add shipping fee (10% of Subtotal)	

Payment Method

CHECK ENCLOSED
(payable to NAFED)

VISA MASTERCARD AMEX

ACCOUNT NUMBER _____

SIGNATURE _____

NAME ON CARD _____

EXPIRATION DATE _____ CCV _____

Total: \$

Please send orders to:

NAFED
55 E. Monroe Street, Suite 1440
Chicago, IL 60603
Fax: (312) 461-0777
Email: meghanf@nafed.org
www.nafed.org

All orders require pre-payment. When possible, please include sample of previously ordered labels.

If you have questions, please contact NAFED at (312) 461-9600. Prices subject to change at any time without notice.