Order Form

Fax: 1-800-203-2703

Email: premierpackaging@mrci.org

Premier PACKAGING

Customer Number: _____ Email Address: _____

Bill To: Ship To:

_____ _____

_____ _____

_____ _____

_____ _____

Payment:

☐ Terms (Net 30) ☐ Credit Card

Name: _____

Card Number: _____

Expiration Date: _____

Quantity	Item Number	Product Name & Description	Price

☐ Backorders Allowed
(subject to freight charges)

☐ No Backorders

***** Please Note *****

As of 3/1/09 Free Shipping Rate for product totaling over $500

Full Case tissue does not qualify for free shipping