| CUSTOMER INFORMATION (BILL TO) |  |
| :---: | :---: |
| Name: |  |
| Address: |  |
| City, State, Zip: |  |
| Phone: | Fax: |
| Contact <br> Person: |  |
| Email: |  |

SHIPPING INFORMATION
 ORDER INFORMATION All calendar orders must be received by November 1, 2014 to ensure holiday delivery.


## ARTWORK FOR CALENDARS

## SIGNATURE REQUIRED:

Exact Repeat $\square$ Yes $\square$ No
Number of Colors
X

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