

## **ORDER FORM**

## TO RETURN BY EMAIL TO sac@editionscec.com

С	LIENT No		DATE				
School Board_			SHIP TO (if different from the Bill to address)  School Board				
							School
Address			Address				
City			City				
ProvincePostal Code				Postal Code			
Phone ()							
YOUR P.O. NUMBER			ORDERED BY				
	<b>Product Code</b>	Title		<b>Unit Price</b>	Qty	Total Price	
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
Ple	ase note:			Sub	Sub-total:		
		anuary 1 <sup>st</sup> of this year and are subject to chan at <a href="www.editionscec.com">www.editionscec.com</a> for current prices.	nge without notice.	Shipping c	Shipping charges *		
Ship	pping charges*: The cust	omer must assume all shipping charges which a			Taxes *		
		Services Tax (GST) is added to the price of book Harmonized Sales Tax (HST) is added to non-bo		ce. T	TOTAL		
We	would like to open	an account with CEC, please invo	oice 🗆			L	
Plea	ase attach this for	m to a P.O. or provide credit card	info, if you don't have	an account with (	CEC:		
VISA(E							
MASTER CARD(			Exp. date:	_) Card security c			
Nar	ne on card:		Signature:				
Or o	call our Customer	Service Department at 1-800-363-	0494 ext. 2				