



Complete and mail to:

Please print clearly.

New Connecticut Press LLC

1511 Ridgewick Drive

Wickliffe, OH 44092

440-833-0546

www.newctpress.com

Bill to:
Name (as it appears on your credit card):

Ship to:
Name:

Street:

Street:

City: State: Zip:

City: State: Zip:

Telephone with area code:

Telephone with area code:

Item	Price	Quantity	Total
Townships of the Western Reserve map, Individual (1)	\$12.99 ea.		\$
Townships of the Western Reserve map, Box (12)	\$154.99 ea.		\$
1st Subtotal <small>total 1 + total 2</small>			\$
Discount <small>Wholesale: 40% (total of boxes of 12 x .40, available to retail merchants only, boxes of 12 only) Educator/Historical Organization: 25% (1st subtotal x .25, proof of affiliation* required, individual or boxes of 12)</small>			-
2nd Subtotal <small>(1st subtotal - discount)</small>			\$
5.5% Ohio Sales Tax <small>(2nd subtotal x .055, retail merchants disregard)</small>			+
Shipping and Handling <small>(quantity total x \$4.00)</small>			+
Order Total <small>(2nd subtotal + sales tax + shipping and handling)</small>			\$

* please mail a photocopy of your faculty ID, include a business card, or make your request on your organization's or institution's letterhead to New Connecticut Press, orders will be completed upon receipt of proof of affiliation

Payment method:

My check is enclosed.
Make checks payable to *New Connecticut Press LLC*

Bill my Visa MasterCard Discover

Card number: _____ Expiration Date: _____

Signature: _____

Thank you for your order!