

NACS ORDER FORM

Order Date: _____

Is your company a member of NACS? Yes No

PURCHASER	
ID #:	
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. Name: _____ Suffix: _____	
Title:	
Company Name:	
Address:	
City: _____ State: _____ Zip: _____ -	
E-mail: _____ Country: _____	
Phone: _____ Fax: _____	

SHIPPING ADDRESS (If different than Purchaser) (Cannot ship to a P.O. Box)	
Attn:	
Title:	
Company Name:	
Address:	
City: _____ State: _____ Zip: _____ -	
Phone: _____ Country: _____	
Email:	

SHIPPING INFORMATION:	<input type="checkbox"/> Standard Ground - 10%	<input type="checkbox"/> Fed Ex Standard Overnight - 10% + \$10	<input type="checkbox"/> Non-North American - 15%
	<input type="checkbox"/> Fed Ex 2nd Day - 10% + \$5	<input type="checkbox"/> Fed Ex Priority Overnight - 10% + \$15	

SKU #	Qty	Description	Member Price	Regular Price	Total Price

TO ORDER YOU MAY:



Return form, with check payable to NACS, in U.S. Funds drawn on a **U.S. Bank to:** NACS • P.O. Box 6930 • McLean, VA 22106-9902

-or-



Fax this form to: 1-800-966-AFAX (2329) International: +1 (703) 836-4564

-or-



Phone NACS at: 1-800-966-NACS (6227) International: +1 (703) 684-3600

-or-



Visit the NACS Web site, nacsonline.com

NACS USE ONLY	
DATE REC.	_____
CH. #	_____
AMOUNT \$	_____
AUTH #	_____
REF #	_____

SUBTOTAL	_____
VA Residents add 5% Sales Tax MD Residents add 6% Sales Tax	_____
Shipping*** (Max. shipping charge \$50 + express shipping costs)	_____
TOTAL	_____

Please allow 7-10 business days for regular delivery within the U.S. There is an additional cost for next day or 2nd day delivery (see above).

PAYMENT INFORMATION	
Please Note: <i>Orders WILL NOT be processed without payment.</i>	
<input type="checkbox"/> Check payable to NACS (US funds drawn on US bank) <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express	
TOTAL DUE NACS \$ _____	
Credit Card #	_____
Cardholder Name	_____
Expiration Date	_____
Signature	_____
<i>The signatory of this form agrees to accept and pay all applicable charges, including adjustments to reflect correction of arithmetical errors as well as all prices, based on the products chosen and your company's current membership status with the National Association of Convenience Stores (NACS). Moreover, the signatory specifically authorizes NACS to charge any such amounts to the credit card referenced on this form.</i>	