

Post-it® Notes

☆ For faster service,
Fax your order form to (586) 949-0813

“Post-it®” is a trademark of 3M.

Restrictions: No bleeds, custom backsheets, copy changes, special packaging or diecuts.

17-01-005

ESTIMATED TAX PAYMENT SCHEDULE		
DUE DATE	FEDERAL	STATE
<input type="checkbox"/> _____	\$ _____	\$ _____
<input type="checkbox"/> _____	\$ _____	\$ _____
<input type="checkbox"/> _____	\$ _____	\$ _____
<input type="checkbox"/> _____	\$ _____	\$ _____



Typestyle	
<input type="checkbox"/> Block	<input type="checkbox"/> Times
<input type="checkbox"/> Block Bold	<input type="checkbox"/> Times Bold
<input type="checkbox"/> Script	<input type="checkbox"/> Old English

Note: If no typestyle is specified, we'll use BLOCK.

Ink Color		
<input type="checkbox"/> Black	<input type="checkbox"/> Red	<input type="checkbox"/> Medium Blue

Paper Color		
<input type="checkbox"/> White	<input type="checkbox"/> Yellow	<input type="checkbox"/> Gray

Sold in Packs of 16 Pads	
3" x 4" x 50 Sheets	\$25.95 Per Pack of 16

Ordering Information		
QUANTITY	PRICE PER PACK	AMOUNT
	\$25.95	
MI Residents add 6% Sales Tax		
Sub Total		
Ground Shipping and Handling		\$5.95
TOTAL AMOUNT DUE		

Ship To: (We ship UPS, no Post Office Box please.)

Name _____

Company _____

Address _____

City _____

State _____ Zip _____ Phone (____) _____

E-mail _____ Fax (____) _____

Please allow 2 weeks for delivery.

Method of Payment: (check appropriate box)

Enclosed is a Check or Money Order payable to: **PFC Products, Inc.**

Charge to my: MasterCard VISA AMERICAN EXPRESS Card DISCOVER

Complete card number _____ Code _____

Expiration date _____ Signature of Card Holder _____

Address of Card Holder _____

Print Name of Card Holder _____