

# COOKBOOK REORDER FORM

THIS FORM **MUST** BE SIGNED AND RETURNED

## GENERAL INFORMATION

### Check One:

Organization (Recognized organizations only)    Business    Individual    Family

Job No. \_\_\_\_\_

Date \_\_\_\_\_

Name of Organization: \_\_\_\_\_

## ORDERING AND SHIPPING

We (I) would like to order \_\_\_\_\_ cookbooks. We (I) understand that the price of these books is in accordance with the current prices on the Reorder Price Chart, plus any Designer Options as contained in our last order, with the exception of the changes listed under Corrections/Alterations.

### send the invoice to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ / \_\_\_\_\_

Business Phone: \_\_\_\_\_ / \_\_\_\_\_

### ship the books to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ / \_\_\_\_\_

Business Phone: \_\_\_\_\_ / \_\_\_\_\_

**Note: We must have a street address. U.P.S. and truck lines cannot deliver to a Post Office Box number.**

## CORRECTIONS/ALTERATIONS

A list of corrections is attached. Any errors made by Cookbook Publishers will be corrected free of charge. Alterations requested by the Customer will be charged at a rate of \$4.00 per correction per order. Customer changes such as adding or deleting material, repositioning recipes on a page or any change which requires an entire page to be retyped will be subject to additional charges based upon Cookbook Publishers' inspection of the requested changes.

There are no corrections or changes. Please print the books exactly like our previous order.

## PAYMENT

**ORGANIZATIONS:** Recognized organizations receive the following terms: Account is due in full 30 days after shipment of books. Delinquent accounts (those over 60 days) will be subject to 1.5% per month interest charges (18% per annum). If collection agency and/or attorney fees are required to collect overdue accounts, the Customer is liable for all collection charges.

**BUSINESSES, INDIVIDUALS AND FAMILIES:** Customer will pay one-half of the estimated cost of the order at the time the Customer places a reorder. The balance, including the freight charges, is due before the cookbooks are shipped.

All orders must be paid in U.S. Currency, or by Visa, MasterCard, American Express or Discover.

## PLEASE SIGN HERE

Upon signature of this Cookbook Reorder Form, this contract is in effect and binding. If Customer cancels, they will be responsible for any costs incurred by the Company for production time and/or materials invested in the order. We (I) understand fully the terms and conditions, and by signing this contract we (I) agree to be responsible for prompt payment within the specified time.

**ORGANIZATIONS: Two unrelated adult signatures are required before the order can be processed. BUSINESSES, INDIVIDUALS AND FAMILIES: One adult signature is required before the order can be processed. Please Note: Your previous order must be paid in full before Cookbook Publishers, Inc. can begin on your reorder.**

Name (Please Print) \_\_\_\_\_

### Correspondent

Signed x \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Term Expires \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

EIN # (Organizations and Businesses Only) \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

### Alternate Correspondent

Signed x \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Term Expires \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Business Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

EIN # (Organizations and Businesses Only) \_\_\_\_\_