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## **GUILD MEMBER SERVICE VARIOUS ITEMS ORDER FORM**

	Pharmacy Name:		OFFICE (	USE ONLY	
	Proprietor's Name:	AC	CCT CODE:	PROCESSED BATCH NO:	
	Person Ordering:	IN	VOICE NO:	BATCITNO.	
Г	ITEM OTY LINIT	LINIT	DOSTAGE		TOTAL

ITEM	QTY	UNIT PRICE	UNIT PRICE	POSTAGE		TOTAL
		Member	Non Member	WA	Interstate	
CHEMIST OPEN SIGNS		\$35.00	\$47.25	\$20.00	\$25.00	
TAX CARDS (100/PK)		\$30.00	\$40.50	\$10.00	\$15.00	
WORKERS COMP CLAIM (100/PK)		\$20.00	\$27.00	\$10.00	\$15.00	
PLEASE NOTE: DELIV	Subtotal	\$				



PAYMENT OPTIONS:										
MASTERCARD/VISA	/BANKCARD:	WA GUILD MEMBERS ONLY- PLEASE INVOICE MY ACCOUNT								
NAME ON CARD:										
CARD NUMBER				□□□□ Exp □□ <b>/</b> □□						