# Demonstrator Order Form

Stampin' Up!® New Zealand Ltd.
IRD 95-412-513

TAX INVOICE

DATE : ___|___|___

Stampin' Up! New Zealand Ltd.
Level 20, ASB Centre
135 Albert Street
Auckland 1010
0800 202 722

**MAIL TO:**
Stampin' Up! New Zealand Ltd.
PO Box 60450
Titirangi
Auckland 0642

## DEMONSTRATOR INFORMATION

DEMONSTRATOR NAME: _____

DEMONSTRATOR #: _____

## COMMISSIONABLE PRODUCT *(Include only commissionable items)*

| ITEM CODE | DESCRIPTION | QTY | **TOTAL** |
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| **1. TOTAL OF COMMISSIONABLE PRODUCT** | | ➡ | |

## NON-COMMISSIONABLE PRODUCT *(Include only non-commissionable items)*

| ITEM CODE | DESCRIPTION | QTY | **TOTAL** |
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| **2. TOTAL OF NON-COMMISSIONABLE PRODUCT** | | ➡ | |

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|---|---|
| **A. TOTAL OF PRODUCT FROM LINES 1 & 2 (FROM ABOVE)** | |
| **B. SHIPPING AND HANDLING** (5% OF LINE A, MINIMUM OF $9.95) | |
| **C. TOTAL AMOUNT DUE** (A + B) (INCLUDES GST) | |
| **D. LESS YOUR 20% DISCOUNT** (20% OF LINE 1 ABOVE–ONLY COMMISSIONABLE PRODUCT, NOT NON-COMMISSIONABLE PRODUCT.) | ( ) |
| **E. TOTAL ORDER AMOUNT PAYABLE TO STAMPIN' UP!** (SUBTRACT LINE D FROM LINE C) ➡ | |

Demonstrator orders can only be shipped to the demonstrator's name and address as they appear in Stampin' Up!'s records. Any changes in a demonstrator's name, address, or telephone number must be communicated to Stampin' Up! prior to ordering to prevent shipping problems.

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