

ORDER FORM – SHIPPING DOCUMENT

DATE: _____

Company Name: _____ Addressee: _____

Telephone: (_____) Facsimile No.(_____) E-mail: _____

Street Address: _____ Dept./Floor _____

UPS does not deliver to P. O. Boxes; include full street address where order is to be delivered

City: _____ State: _____ ZIP Code: _____

(4 digit zip)

<i>Make Checks payable: Treasurer State of Connecticut</i>						Total
“Notice To Contractors” Subscription, Calendar Year 2008 = \$130.00 →						
Form 816 Standard Specifications. Picked Up \$16.00 Each, By Mail \$20.00 Each (Qty = _____) →						
Project No.	Qty	Size (sm/reg)	Cost	Tax *	Postage **	
Check Number: →					Grand Total →	

* All Connecticut firms must include Connecticut Sales Tax on all plan orders. Sales tax should not be included for mail order requests from firms located outside Connecticut.

Postage is **NOT required on orders using their Federal Express Account.

Overnight service (***Federal Express only***) Account No: _____

If using Federal Express, please do not include the cost of postage. Packages are shipped after payments have been processed.



Mailroom Information Only
 UPS TRACKING INFORMATION

(Please check one)

- Ground Service
- Overnight (Next Day)