

Stratford Software, Inc

Fax order form to 206.984.3846

SHIP TO:

ACCOUNT NUMBER	P.O. NUMBER	DATE

All orders must be pre-paid by credit card or paypal

Cardholder Name:.....

Cardholder Billing Address:.....

Pay by: (Circle One) Visa/MasterCard/Amex/Discover / Paypal: paypal@stratfordsoftware.com

Card Number: _ _ _ _ _

Card Expiration: _ _ / _ _ 3/4-digit Security Code: _____

Authorized Signature: _____ Date: _____

ITEM NUMBER	DESCRIPTION	QTY/BOX	QUANTITY
SH-STMT1	STATEMENT, 1 UP (continuous)	2500/box	
SH-STMTLASER	STATEMENT, LASER 1 UP	1000/box	
SH-EN-1WI	RETURN ENVELOPES – 1 WINDOW	500/box	
SH-EN-2WI	ENVELOPES - 2 WINDOW (OUTSIDE)	500/box	
CMS2	CMS (rev 08/05) 2 PART (continuous)	1000/box	
CMS1	CMS (rev 08/05) 1 PART (continuous)	2500/box	
CMSLC	CMS (rev 08/05) LASER (single sheets)	2500/box	
UB04-2	UB04 FORMS, 2 PART (continuous)	1000/box	
UB04-1	UB04 FORMS, 1 PART (continuous)	2500/box	
UB04-L	UB04 FORMS, LASER (single sheets)	2500/box	
ADA-2	ADA FORMS, 2 PART (continuous)	1000/box	
ADA-1	ADA FORMS, 1 PART (continuous)	2500/box	
ADA-L	ADA FORMS, LASER (single sheets)	2500/box	
CMS-ENV-SM	CMS ENVELOPE, SM (self seal,tri-fold claims)	1000/box	
CMS-ENV-LG	CMS ENVELOPE, LG (self seal, no claim folding)	300/box	
UB04-ENV-SM	UB04 ENVELOPE, SM (fold claims in half)	1000/box	