

Planner Order Authorization Form*

For ordering assistance, call 800.365.3377 - Please complete both sides of the order form. Order must be signed.

NOTE: If you are TAX EXEMPT, you must complete and sign our supplied exemption certificate. A copy of your state tax exempt form does not qualify. You can request one by email or download it from our website. If the completed exemption certificate is not received, we are required by law to charge sales tax.

SCHOOL NAME _____

Previous Production Number _____

(This is often located inside of the front cover or on the back cover. If you cannot locate your previous number, please disregard.)

QUANTITY

Student Planners # _____

Primary* _____

Middle School* _____

Classic* _____

TOTAL Planners # _____

Elementary A* _____

Elementary B* _____

Elite* _____

PLANNER STYLE (see next page for additional personalized planner information)

For ordering folders, see the Folder Order Authorization Form on pages 33-34

Subtotals

IMPRINTED PLANNER COVER CHOICE (pricing from pages 4-8)

Total Planner quantity _____ x \$ _____ each =

Stock cover # _____ (page 9)

Less 50%

School Name for Imprint _____ Font (See Inside Front Cover) _____

Optional custom cover (page 10 and 29)

Enclosed is my mock-up design

Ink color(s) _____

Progress Mascot

Exact repeat of last year's design

For one-color covers:

Name and Number _____

Standard - white background, text colored

Total

Reverse - colored background, text white

Promo Code

203303

HANDBOOK OPTIONS AND PRICING (no discount)

Total Number of Handbook Pages _____

Total Planner quantity _____ x # of pages _____ x \$.04 each =

(one page is one side of a sheet of paper)

Exact repeat of last year's copy (no proof available)

Print-ready file in PDF format will be emailed or mailed on a CD/DVD/Flash Drive. Include a printed copy, no proof available.

Copy to be typeset enclosed (see Other Optional Items below for additional pricing)

OTHER OPTIONAL ITEMS (no discount) (pages 11 and 12)

Inside Front Cover Printing (Back Cover Printing Not Available)

Per Order: \$50 Artwork charge

Full-Year Edition

Per Order: \$.15 each

July 2017 (added at the front of each planner) July 2018 (added at the back of each planner)

Total quantity _____ x \$.50 each =

Vinyl Pouch (Not available for Elite or Classic)

Total quantity _____ x \$.50 each =

Added at the front of each planner Added at the back of each planner

Page Marker Rulers

Total quantity _____ x \$.20 each =

Additional Hall Pass Page (printed on both sides)

Total quantity _____ x \$.15 each =

Typesetting (page 10)

Total pages _____ x \$.25 each =

Lesson Plans (Not available for Classic planner)

Teacher Edition quantity _____ x \$.80 each =

Evaluation Records (Not available for Classic planner)

Teacher Edition quantity _____ x \$.65 each =

Four Page Resource Inserts Bully Education Character Education

Total quantity _____ x \$.30 each =

Added at the front of each planner Added at the back of each planner

Proof: See page 14.

COST ESTIMATE

Subtotal: (without shipping) = \$ _____

Planner Shipping and Handling

Shipping total quantity _____ x \$.30 each = \$ _____

Estimated TOTAL = \$ _____

Sales tax, if applicable, will be added to your total

* Order form for 48 contiguous states.

Planner Order Authorization Form*

MAIL TO: Progress Publications®, 428 N. Ohio St., Columbus, KS 66725 or Fax to 800.572.5163

THIS ORDER INFORMATION PAGE HAS AN UPDATED FORMAT. PLEASE READ CAREFULLY AND FILL OUT COMPLETELY.

NOTE: If you are TAX EXEMPT, you must complete and sign our supplied exemption certificate. A copy of your state tax exempt form does not qualify. You can request one by email or download it from our website. If the completed exemption certificate is not received, we are required by law to charge sales tax.

SCHOOL DISTRICT CONTACT INFORMATION

Bill to Ship to

District _____

Address _____

City _____ State _____ Zip _____

Accounts Payable Contact _____

AP Phone (_____) _____ Ext. _____

AP Fax (_____) _____

AP Email _____

Hold Product Until: _____

SCHOOL CONTACT INFORMATION

Bill to Ship to

Name _____

Principal _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Ext. _____

Order Contact _____

Phone (_____) _____ Ext. _____

Email _____

Home Phone (_____) _____

I have read and agree to the **TERMS AND CONDITIONS** on this form and page 35 of this catalog.

****Order will not be processed without a signature.**

Print Name - Principal, Superintendent, or Purchasing Official

Title

Signature - Principal, Superintendent, or Purchasing Official

Date

PAYMENT INFORMATION** (check only one)

Check Enclosed

Credit Card (You will be contacted for your credit card information)

Send Invoice (check only one)

Purchase Order Enclosed

My signature above is authorization for invoicing

PROOF INFORMATION: Proofs are not available on exact repeats or some print-ready files. Please ensure that someone is readily available at any time of year to receive and respond to your proof. Immediate response is requested on all proofs. If a proof is requested, your order **will not** be printed until you have responded with approval or changes. Please watch for an email from proofs@progresspublications.com

Do not send a proof. I will accept responsibility for any errors. Please email me a proof of my front cover imprint only.

Name _____ Summer Phone _____ Alternate Phone _____

**Email _____ **Alternate Email _____

Alternate email must be a non-school address. This information will not be shared with third parties.

****Required**

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