

PURCHASE ORDER FORM

This form is for the ETM Machine APP ONLY!

This form must be completed in its entirety and sent with the Purchase Order.

Purchase Order #

Check here if same as Billing

Billing Address:

*Name

*Organization/School

*Address

*Town/City

*State and Zipcode

*Email Address

*Phone #

Shipping Address:

*Name

*Organization/School

*Address

*Town/City

*State and Zipcode

*Email Address

*Phone #

Administrator Account Information - *Required (Person in charge of subscription)

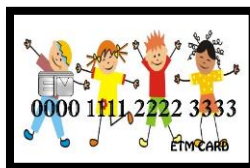
Full Name: _____ Email: _____

ETMcard Design Options– Check design from Predesign and enter # needed or Custom Design and fill out information.

1. Predesign- No extra charge



of cards



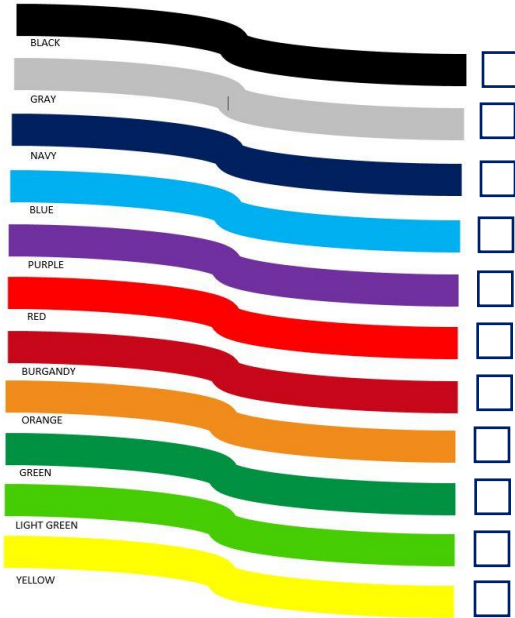
of cards



of cards

2. Custom Card - Additional set up fee \$50.00

Check on Color:



Bank Name: _____

Logo: email a jpeg or png to:
 info@educationalclassroomsystems.com
 *include the PO# in subject line.

of cards

Use this chart to determine your yearly subscription rate.

| | |
|-------------------------------|------------------------------|
| 1 - 50 accounts | \$4.00 per account |
| 51 - 150 accounts | \$3.50 per account |
| 151 - 1500 accounts | \$3.00 per account |
| 1501 + accounts | \$2.00 per account |

Your Order:

| Quantity (# cards) | Price (See chart) | Total (Qty X Price) |
|--------------------|---|---------------------|
| | | |
| | Set Up Fee for Custom Cards: \$50.00 if applicable | |
| | Shipping | |
| | Total | |

Email Purchase Order Form and Purchase Order to:

Info@educationalclassroomsystems.com

Or

Mail Purchase Order Form and Purchase Order to:

Educational Classroom Systems
 PO Box 650296
 Sterling, VA 20165

Coupon Code: