The Commonwealth of Massachusetts

EMPLOYEE BUSINESS CARD ORDER FORM



ADDRESS LINE 1 ADDRESS LINE 2 CITY, STATE ZIP

The Commonwealth of Massachusetts

DIVISION LINE OPTIONAL LINE

> NAME TITLE

(000) 000-0000 FAX: (000) 000-0000 EMAIL: name@middlesex.mass.edu As the Nation's largest producer of business cards, we are pleased to offer our services of top quality business cards like the attached sample at very attractive rates made possible by volume production.

THESE CARDS FEATURE:

- -Commonwealth Seal foiled in blue and gold
- Premium Quality Bristol stock
- $-3^{1/2}$ "x 2" card size

Email: navitorsekeyaccts@navitor.com

SAMPLE LAYOUT	Customer Service: 877-728-1008 Fax: 866-235-6560
	DE OR ATTACH A CAMPLE WITH CHANGE IF ANY
	RE OR ATTACH A SAMPLE WITH CHANGES IF ANY VE WILL FOLLOW IT EXCLUSIVELY FOR COPY
	Pure en la company de la compa
	DIVISON LINE
	OPTIONAL LINE
	NAME
	TITLE
A	Buous
Address 1	PHONE
Address 2	FAX
CITY STATE ZIP	EMAIL
We reserve the right to re	earrange the copy submitted if neccesary.
QUANTITY 250 Business cards - \$43.23	1 500 Business cards - \$54.28
This order is for: UPS Ground Add \$8.00 S/H Charge Prices effective May 2022	UPS Ground Add \$9.00 S/H Charge UPS Ground Add \$10.00 S/H Charge
Mail your order a	and check to: Navitor
OUR CHECK / MONEY ORDER / CREDIT CARD NUMBER MUST ACCOMPANY YOUR ORDER!	Attn: Special Accounts 1625 Roe Crest Dr. North Mankato, MN 56003
This includes all delivery charges; allow 10-15 days for deliv	
NOTE: ADDITIONAL CHARGES MAY APPLY FOR SPECIAL REQUESTS CONDER CANCELLATIONS	DR I address on item. Do not use P.O. Box address. Navitor
☐ PERSONAL CHECK ☐ MONEY ORDER ☐ VISA ☐ MASTER	1 1625 Roe Crest Drive I North Mankato, MN 56003 VIA: U.P.S. RCARD
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Expiration Date: _ Cardholder's Signature: -

Cardholder's Name (Print Please):

Cardholder's Phone Number: _

INDIVIDUAL **ADDRESS**