# ORDER FORM

**Federal ID#: 54-1191465**  
Division of Development Concepts, Inc.

## PHONE ORDERS

1.800.361.1055

## MAIL ORDERS

7820 Sudley Road, Suite 100  
Manassas, VA 20109

## FAX ORDERS

703.335.9486

## ONLINE ORDERS

www.impactpublications.com  
(query@impactpublications.com)

### Bill To:

- **Name:** ____________________________________________  
- **Title:** _____________________  
- **Address:** ____________________________________________________________________________  
- **City:** ____________________________________________  
- **State/Zip:** _____________________  
- **Phone:** ( ) _____________________ (daytime)  
- **E-mail:** ____________________________________________

### Ship To: (if different from “Bill To;” include street delivery address) :

- **Name:** ____________________________________________  
- **Title:** _____________________  
- **Address:** ____________________________________________________________________________  
- **City:** ____________________________________________  
- **State/Zip:** _____________________  
- **Phone:** ( ) _____________________ (daytime)  
- **E-mail:** ____________________________________________

### ORDER FORM

**ORDER #** | **QTY** | **PRODUCT TITLE** | **FORMAT** | **PRICE** | **TOTAL**
---|---|---|---|---|---

- Please specify video format:
  - DVD
  - Streaming Video
  - Combined

**SUBTOTAL.................................**  

- Virginia orders add 6% sales tax
  - All facilities of the FEDERAL GOVERNMENTS are exempt from sales tax
- California orders add ___% sales tax
  - All facilities of the FEDERAL GOVERNMENTS are exempt from sales tax

**Shipping and handling ($5 for first item)____________**  

**PLUS** following percentages when **SUBTOTAL** is:

- $10-$99—multiply subtotal by 10% _________
- $100-$999—multiply subtotal by 9%__________
- $1,000-$4,999—multiply subtotal by 8%_______
- Over $5,000—multiply subtotal by 7%________

- If shipped outside the Continental US, add another $7.00 plus 15% to the subtotal  
  (call/fax/email for special delivery services) ____________

**TOTAL ENCLOSED ................................**

### PAYMENT METHOD:

- **Purchase Order #________________** (attach or fax with this order form)
- **Check** – Make payable to IMPACT PUBLICATIONS
- **Credit Card:**  
  - Visa  
  - MasterCard  
  - AMEX  
  - Discover

Card # ____________________

Signature ____________________

Name on Card (print) ____________

**TERMS:** Individuals must prepay; approved accounts are billed net 30 days. All orders under $100.00 should be prepaid.

**Rush orders:** fax, call, or email for more information on any special shipping arrangements and charges.