

**PLEASE FILL OUT THE FILLABLE
PURCHASE ORDER FORM ON THE NEXT
PAGE OF THIS PDF.**

**THEN EITHER EMAIL IT TO:
sales@sheppardenvelope.com**

**OR FAX IT TO:
508-754-3108**

ALL ORDERS ACKNOWLEDGED ON DATE RECEIVED

Please FAX to 508-754-3108 or EMAIL to sales@sheppardenvelope.com

PURCHASE ORDER # _____

DATE _____

COMPANY INFORMATION:

Name _____

Address _____

City _____

State _____ Zip _____

Telephone _____

Contact _____

Phone _____

Email _____

Ship to Address (if different)

Company/name _____

Address _____

City _____

State _____ Zip _____

NEW MASSACHUSETTS ACCOUNTS:

Please send us your Sales Tax Resale Certificate.

CREDIT CARD INFORMATION:

The card will not be charged until the time of order shipment.

VISA, MasterCard, Discover, Amex Credit Card Holder:

Number: _____

Expiration Date: _____ CVC _____

Full name on card: _____

Card holder address (if different): _____

City _____

State _____ Zip _____

ORDER TYPE: NEW REPEAT REPEAT WITH CHANGES **PREVIOUS ORDER #:** _____

Product Description: _____

Item # (if available): _____

Print & Ink Color(s): _____

Paper: _____

Set up/Ink Match Charge: _____

Quantity: _____

Price: _____

Send proof to: _____

SPECIAL INSTRUCTIONS

SHEPPARD ENVELOPE MFG CO

P.O. BOX 358 • 133 SOUTHBRIDGE ST. • AUBURN, MA 01501

Phone: 800-325-6622 Fax: 508-754-3108 sales@sheppardenvelope.com

POCC 8/10/2021