

ASPEN Order Form and Shipping Policies

American Society for Parenteral and Enteral Nutrition
8401 Colesville Rd., Ste. 510
Silver Spring, MD 20910

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ORDER FORM

Publication Code	Title	Quantity	Total
			\$
			\$
			\$
			\$
			\$
			\$
			\$
	Subtotal		\$
	Promo Code (if applicable)		
	Shipping & Handling (see table above)		\$
	Shipping Surcharge (if applicable)		\$
	Add Sales Tax: MD/PA 6%, IL 6.25%, NY 4%, NC 4.75%		\$
	TOTAL		\$

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Check #: _____

Check \$: _____

CUSTOMER INFORMATION

Address Type (circle one): **HOME** **BUSINESS** (ASPEN Does not ship to P.O. Boxes)

Full Name

ASPEN Member ID (if applicable)

Title

Company Name

Street Address 1

Street Address 2

City/State/Province

Zip/Postal Code

Country

Shipping Address IF DIFFERENT from Customer Address

Email Address

Telephone Number