

VENDOR CONTACT INFORMATION

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| Palomar Pen and Office Supply 700 S. Rancho Santa Fe #C San Marcos, California 92069 | Sales Rep: Craig Morrison Telephone: (760) 744-7634 Fax No.: (760) 727-6826 |
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ORDER DATE: MM/DD/YY

INSTRUCTIONS

1. Fill in appropriate information.
2. Print this page as your order form.
3. Fax to Palomar Pen.

Note: Any deviations from the standard CSUSM Graphic Standards will result in additional cost to your department. All orders will be delivered to Materials Management.

BUSINESS CARD TEMPLATE

First MI Last Name, plus Ph.D. or other designation (if applicable)
Title 1
Title 2 - Optional



www.csusm.edu

Tel: 760.750.####
Cell: ###.###.#### (optional)
Fax: 760.750.#### (optional)
email@csusm.edu
Additional Website (optional)


Department Line 1
Department Line 2 (optional)
California State University San Marcos
333 S. Twin Oaks Valley Road
San Marcos, CA 92096-0001

ORDER INFORMATION

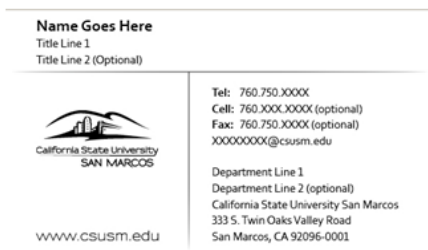
| QTY. | Unit | Description | Unit Price | Total |
|------|--------------|---|------------|-------|
| | 500 per box | Standard Format- Simple Design w/ Black Ink Only | \$29.00 | |
| | 500 per box | Enhanced Format- Standard plus Blue / Gray Background | \$38.00 | |
| | 1000 per box | Standard Format- Simple Design w/ Black Ink Only | \$39.00 | |
| | 1000 per box | Enhanced Format- Standard plus Blue / Gray Background | \$48.00 | |

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|----------------------------------|--------------------|
| Deliver to: Name: | TAX @ 7.75% |
| Department: Building Room | TOTAL |

PAYMENT METHOD

| | | | | |
|-----------------------------------|------------------------------|---|-------------------------|-------|
| <input type="checkbox"/> Pro Card | Account Number: | | Expiration Date: | MM/YY |
| | Cardholder Name: | | Extension No: | X |
| | Cardholder Signature: |  | Date Signed: | |

Standard Format
Simple Design w/ Black Ink Only



Enhanced Format
Standard plus Blue-Gray Background

