

Northern Health Print Shop
1411 3rd Avenue
Prince George, BC V2L 3G1
Phone: 250-649-7550 Fax: 250-564-9189
Website: www.documentsource.northernhealth.ca

Date: _____

Requestor

Name/company: _____ Phone: _____

Email: _____

Item	Description	Size	Cost (each)	Quantity	Total
10-300-6052	Northern Communities Wall Map	36" x 48"			
10-300-6066	Northern Communities Wall Map	27" x 36"			
Terms & conditions: Orders will generally shipped within 7 business days. Once orders are printed cancellations/refunds cannot be accepted. Northern Health and/or its print shop are not responsible for any damage or lost shipments with BC Mail/Canada Post. Do not email credit card information.			Postage & handling		
			Subtotal		
			PST/GST (12%)		
HST#: 886135953			Balance due		

Visa **Mastercard** **American Express**

Name: _____

Credit card #: _____ Expiry date: _____ CSV (3 digit security code): _____

Billing address:

Address 1: _____

Address 2: _____

City: _____ Province: _____ Postal code: _____

Authorizing signature: _____ Date: _____

I agree to the terms & conditions and I hereby authorize payment to be charged to my credit card by Northern Health.

Shipping address (if different than above)

Address 1: _____

Address 2: _____

City: _____ Province: _____ Postal code: _____

Print and fax completed form to the Northern Health print shop