

# Poster Annual Subscription Form

National Safety Compliance, Inc.  
509 S Cavalier Ave  
Springfield, MO 65802  
1-877-922-7233  
1-866-869-8108 fax

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Billing Address: \_\_\_\_\_  
 Ship To Address: \_\_\_\_\_

How many posters would you like to receive PER shipment: \_\_\_\_\_ Please indicate how often you would like to receive your shipments of posters: (only check one)

- Please indicate below:
- Which posters you would like to receive
  - How many of each
  - The shipment number on which you would like to receive each poster. Please place a "1" for the first shipment, "2" for the second shipment and so on.
- Every Month (12 shipments per year)  
 Every Other Month (6 shipments per year)  
 Every Quarter (4 shipments per year)

#	Qty	Shipment#	#	Qty	Shipment#	#	Qty	Shipment#	#	Qty	Shipment#
P801	_____	_____	P817	_____	_____	P833	_____	_____	P739	_____	_____
P802	_____	_____	P818	_____	_____	P834	_____	_____	P740	_____	_____
P803	_____	_____	P819	_____	_____	P835	_____	_____	P741	_____	_____
P804	_____	_____	P820	_____	_____	P836	_____	_____	P744	_____	_____
P805	_____	_____	P821	_____	_____	P837	_____	_____	P745	_____	_____
P806	_____	_____	P822	_____	_____	P704	_____	_____	P746	_____	_____
P807	_____	_____	P823	_____	_____	P707	_____	_____	P748	_____	_____
P808	_____	_____	P824	_____	_____	P708	_____	_____	P753	_____	_____
P809	_____	_____	P825	_____	_____	P711	_____	_____	P9FED	_____	_____
P810	_____	_____	P826	_____	_____	P712	_____	_____	_____	_____	_____
P811	_____	_____	P827	_____	_____	P713	_____	_____	_____	_____	_____
P812	_____	_____	P828	_____	_____	P714	_____	_____	_____	_____	_____
P813	_____	_____	P829	_____	_____	P717	_____	_____	_____	_____	_____
P814	_____	_____	P830	_____	_____	P720	_____	_____	_____	_____	_____
P815	_____	_____	P831	_____	_____	P730	_____	_____	_____	_____	_____
P816	_____	_____	P832	_____	_____	P738	_____	_____	_____	_____	_____

Please randomly select posters for my company.

Please determine cost per poster by calculating the total number of posters to be purchased during the entire year and then use the following chart:

<input type="checkbox"/> <b>Non-Laminated Posters</b>	<input type="checkbox"/> <b>Laminated Posters:</b>
4 to 10 \$10.95each	4 to 10 \$12.95each
11 to 20 \$9.95each	11 to 20 \$11.95each
21 to 40 \$8.95each	21 to 40 \$10.95each
41 to 100 \$7.95each	41 to 100 \$9.95each
101 to 200 \$6.95each	101 to 200 \$8.95each
201 to 500 \$5.95each	201 to 500 \$7.95each
501 to 1000 \$4.95each	501 to 1000 \$6.95each

Annual shipping charge is as follows:

Monthly (12 shipments)	\$60.00
Bi-Monthly ( 6 shipments)	\$30.00
Quarterly ( 4 shipments)	\$20.00

Total Number of Posters Per Year: \_\_\_\_\_  
 Per Poster Cost: x \_\_\_\_\_  
 Poster Sub Total: = \_\_\_\_\_  
 Annual Shipping Cost: + \_\_\_\_\_  
 Total Due for Subscription: = \_\_\_\_\_

Please select a payment option:  
 We are paying in advance by credit card or check. Check# \_\_\_\_\_ Credit Card#: \_\_\_\_\_ Exp.: \_\_\_\_\_  
 Please bill us for the total annual subscription. (Full amount is due 30 days after first shipment.) PO# \_\_\_\_\_