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DOCUMENT ORDER FORM

COMPANY: _____ **DATE:** _____
CONTACT: _____ **PHONE:** _____
SHIP ADDRESS: _____

QUANTITY	DOCUMENT #	PRICE	PRICE
		SUB-TOTAL	
		SHIPPING	
		SALES TAX (8.25%)	
		TOTAL	

PAYMENT INFORMATION:

Visa MasterCard Discover (circle one)

CARD #: _____ EXP. DATE: _____

NAME ON CARD: _____

Or

CHECK # : _____ CHECK AMOUNT: _____

NOTE:

All packages are sent by regular US Mail unless otherwise requested. Shipping rates:

SUB-TOTAL AMOUNT	SHIPPING COST
\$ 0.00 - \$ 20.00	\$ 3.00
\$ 21.00 - \$ 30.00	\$ 4.00
\$ 31.00 - \$ 49.00	\$ 6.00
\$ 50.00 - \$ 100.00	\$ 7.00
\$ 101.00 +	Please call

Please allow **3-4** days to receive your shipment, after payment is received.

Please make checks payable to **AIA Houston**.

We **only** accept Visa, MasterCard and Discover credit cards as form of payment.

All prices are subject to change without notice.