WAYNE LEUPOLD EDITIONS, INC.

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PLEASE TYPE OR PRINT CLEARLY

Name _____ Phone ( ) _____

Church Name _____

Address _____ Apt. # _____

City _____ State _____ Zip _____

E-mail _____ Add me to your email list: Yes ☐ No ☐

☐ Check Enclosed ☐ MC/Visa/Discover # _____ Exp. _____ Code _____

Order Date _____ Signature (*required*) _____

Quantity	Catalog #	Composer/ Title	Price (each)	Total Price

Sub-total	$
North Carolina residents add 6.75% Sales Tax	$
Shipping & Handling	$
TOTAL	**$**

FOR OFFICE USE ONLY

Authorization # _____

Reference # _____

Date _____ Invoiced ☐ Shipped ☐

☐ PAID ☐ SHIP
☐ BILL ☐ TAKEN