

**IFLA Voucher
MLNC Order Form**

Library Information

Institution Name: _____

Mailing Address: _____

City _____ State _____ Zip _____

Contact Information

Primary Contact: _____ Email: _____

Telephone: _____ Fax: _____

Technical Contact: _____ Email: _____

Telephone: _____ Fax: _____

Voucher Information

Number of Purchase Full Vouchers at \$15.00/each: _____

Number of Half Vouchers at \$7.50/each: _____

MLNC will charge a \$5.00 shipping and handling fee for each order

Please check your chosen method of payment:

Invoice (MLNC Members Only)

Credit card

Deduct from deposit account (MLNC Members Only)

We will send an email invoice to the primary contact listed above with links and instructions for credit card payment.

I understand my institution will be invoiced _____ (fill in calculated total) for the database(s) ordered above.

Authorized Signature/Title

Date

Return to MLNC via Fax or attached to email

MLNC

13610 Barrett Office Drive, Suite 206, Ballwin, MO 63021

phone: 800-969-6562 • fax: 314-394-1326

support@mlnc.org