



Please Remit to:

**BOOK & BRAIN
CONSULTING®, INC.**

1000 RIO BRAVO WAY
SHADY SHORES, TEXAS 76208

www.bookandbrain.com

TOLL FREE 1-877-21-BRAIN

OFFICE USE ONLY

DATE _____

CHECK NO. _____

INVOICE NO. _____

CODE NO. _____

AMOUNT _____

Please pay from this invoice. No statement will be issued. Indicate invoice number in all communications regarding this invoice.

PURCHASE ORDER FORM

SOLD TO _____

SHIP TO _____

SCHOOL TAX ID#

REQUIRED FOR NON-TAX SALES

P.O.#

ORDER CODE	QUANTITY	TITLE / ITEM / DESCRIPTION	UNIT PRICE	AMOUNT

SUBTOTAL \$ _____

SALES TAX \$ _____

SHIPPING/HANDLING OF GRAND TOTAL 10% _____

AMOUNT DUE \$ _____

THANK YOU FOR YOUR ORDER!

ORDERS SHIPPED WITHIN FIVE TO 10 BUSINESS DAYS.