Order Form
2007 Update on Federal Wage Changes
for NDF Court Withholding Software

Office Use only
Order No. _____
Order Rec'd _____
Ship Date _____

Check the update CDs you wish to order:

☐ Single - Employer Update ..... $_____
☐ Multi - Employer Update..... $_____

Total Merchandise ..... $_____
Shipping and Handling ..... $ 5.50
Subtotal..... $_____
Sales Tax * ..... $_____
* Kansas Residents add Sales Tax at your Local Rate
Total of Order ..... $_____

Method of Payment:

Governmental bodies will be billed, others should send payment or use credit card:

☐ Check Enclosed (payable to NDF Co.)

☐ VISA ☐ MasterCard

Name on card: _____
Address on card: _____
_____
Card No. _____–_____–_____–_____
Expiration date _____ / _____
Authorized signature on card: _____

Your Purchase Order No. _____
Telephone: _____
FAX: _____
Person Ordering: _____

Ship Program(s) to:

_____
Name
_____
Name of Office
_____
Address - street/location address for UPS delivery
_____
City State Zip + 4

Send Invoice to: (if different)

_____
Name
_____
Name of Office
_____
Address - post office address - (for invoice and billing)
_____
City State Zip + 4

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