## Herbarium

### University of Michigan

**Michigan Flora Order Form**

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**Print and Mail or Fax To:**

University of Michigan Herbarium | Attn.: Book Sales | 3600 Varisty Drive | Ann Arbor, MI 48108-2228
Tel (734) 615-6200 | Fax (734) 998-0038 | e-mail: ehnism@umich.edu

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<table>
<thead>
<tr>
<th>Item</th>
<th>Pricing</th>
<th>QUANTITY</th>
<th>AMOUNT $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michigan Flora Part I, II, &amp; III</td>
<td>$25.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shipping Within USA</td>
<td>$12.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shipping to Canada/Mexico</td>
<td>$32.00</td>
<td></td>
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</tr>
<tr>
<td>Shipping Internationally</td>
<td>$48.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal:**

Michigan Residents Only - 6% Sales Tax ($2.22)

**TOTAL AMOUNT**

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**Terms:** Prices are subject to change. **All Sales Are Final. No Returns Accepted**

**International Shipping:** Duties/fees/taxes not included. Payment is the responsibility of the recipient/purchaser at the time of delivery.

**Payment Orders Shipped in The USA:** Visa/Master Card, purchase orders, and checks or money orders made payable to the UNIVERSITY OF MICHIGAN

**Payment Orders Shipped Outside USA:** Visa/Master Card only. Quotes for adjusted large bulk order mailing charges will be sent by request

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**Shipping Address**

Name: 
Address: 

Telephone: 
e-mail: 

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**Billing Address**

(if different than shipping address)

Name: 
Address: 

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**Credit Card Orders:**

_____Visa _____ MasterCard - Account Number: __________________________________________________________

Exp. Date: _____ / _____ Verification Code (located on back of card): ________________

Billing Address Street Number: __________________________ Billing Address Zip Code: __________

Name as it appears on card: ___________________________ Signature: ___________________________

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