Pelican Music Publishing

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Name:		Date:	
Street:			
City:		State:	
Postal Code:		Country:	
Email address:		Fax:	

Title	Composer	Intrument	Qty	Cost
			Subtotal:	

Credit Card Type:	MC VISA	(Circle One)	Tax (if IL 7.25%):	
Credit Card No:			Freight Cost:	
Expiration Date:			Please quote freight prior to shipping (Check box):	☐
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Name (as shown on card):			TOTAL:	
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