

## MANUAL ORDER FORM

Please Print Cle	early in Ink		
Name			
Company Name			
Mailing Address (	Number, Street, Unit#)		
City/Town		Postal Code	Phone
Email Address			Fax
Privacy Policy: MPO will u	use this personal information collected to commu	unicate with you regarding updates to	the program.
Manual Fees (H	IST # 121262919)	# Required	Amount Due
☐ Members	\$165.00 + \$8.25 (5% HST) = <b>\$173.25</b>	x = \$_	
□ Non-Members	\$330.00 + \$16.50 (5% HST) = <b>\$346.50</b>	<b>o</b> x = \$_	
Method of Pay	ment (Payment must accompany form)	)	
☐ Cheque (payab	ole to MPO) USA Ma	asterCard	
Card #		Exp (mm/yy)	
CVV# (3 digit numb	er on the back of card)		
Cardholder Name	e		
Signatura			

## **MEAT & POULTRY ONTARIO**