

Materials Order Summary Sheet



4 Hardscrabble Heights, P.O. Box 382
 Brewster, New York 10509
 (800) 800-2598
 FAX (845) 277-3548
 info@questarai.com

Vendor Code: _____	
FEIN: 13-2846796	DUNS: 07-096-1024

BILL TO:

NAME _____
TITLE _____
DISTRICT NAME _____
SCHOOL NAME _____
STREET ADDRESS _____
CITY, STATE, ZIP _____
TELEPHONE _____
E-MAIL _____

SHIP TO:

MATERIALS TOTALS

Attach a copy of this **Summary Sheet** and all individual **Materials Order Forms** to your institutional **Purchase Order**

Degrees of Reading Power (DRP)	Enter total	\$
SSSMART (Science, Social Studies, Mathematics, Academic Reading Test)	Enter total	\$
Reading Power Essentials (RPE)	Enter total	\$
Signposts Early Literacy Assessment System	Enter total	\$
MAC II Test of English Language Proficiency	Enter total	\$
TextSense Summary Writing	Enter total	\$
Educator's Word Frequency Guide	Enter total	\$
Core Knowledge Curriculum-Referenced Tests	Enter total	\$

Please ship materials to be scored to:
Questar Assessment, Inc.
14720 Energy Way
Apple Valley, MN 55124
Attn. Processing

DELIVERY DATE REQUESTED
/ /

	DELIVERY DATE	SUBTOTAL	
Shipping & Handling	Regular UPS - Add 8% (minimum \$8.00)	<input type="checkbox"/>	
	2nd Day Air - Add 15% (minimum \$20.00)	<input type="checkbox"/>	\$
	1st Class, Next-Day Air - Add 20% (minimum \$20.00)	<input type="checkbox"/>	
	International - Actual shipping costs plus \$7.95	<input type="checkbox"/>	
(Please Allow 30 Days For Regular Delivery)	IN, MI, MN, NJ, NY, and TX residents add appropriate sales tax (or Tax Exempt No.)		\$
		GRAND TOTAL	\$

Check all that apply:

- We will submit completed Answer Documents to Questar Scoring Services on ____/____/____.
- Please consider this our order for a royalty-free, non-transferable **Class A License** for our school/district to score and report DRP, SSSMART, or MAC II test results by hand.
- We plan to score and report locally by computer. Note: Please call Questar at (800) 800-2598 for the required **Class B License** and format specifications for Questar Tables CDs.
- Enclosed is our check for \$_____. Checks must be payable to Questar Assessment, Inc. in U.S. Dollars.
- Enclosed is our **Purchase Order #**_____. Terms are net 30 days.

AUTHORIZED SIGNATURE _____ DATE _____