



**SEI Partner**  
**Carnegie Mellon®**

**Order Form**

**Return completed form to**  
SEI Partner Network Administrator  
Kay Vinay  
[klv@sei.cmu.edu](mailto:klv@sei.cmu.edu)  
1 - 412 -268-5875

**Order Information**  
Please print clearly

\*Required fields

\*Name: \_\_\_\_\_

\*Organization: \_\_\_\_\_

\*Shipping Address (no PO Box number): \_\_\_\_\_  
\_\_\_\_\_

\*City: \_\_\_\_\_ \*State/Province: \_\_\_\_\_

\*Zip/Postal Code: \_\_\_\_\_ \*Country: \_\_\_\_\_

\*Daytime Phone: \_\_\_\_\_

\*Email address: \_\_\_\_\_

**Merchandise Information**

<b>ITEM</b>		<b># PACKAGES NEEDED</b>
CMMI-DEV v1.3 wall chart (Set of 25 per Package)	\$31.25/ea	_____
CMMI-SVC v1.3 wall chart (Set of 25 per Package)	\$31.25/ea	_____
CMMI-ACQ v1.3 wall chart (Set of 25 per Package)	\$31.25/ea	_____
<b>TOTAL WALL CHART PACKAGES</b>		_____
CMMI-DEV v1.3 reference card (Set of 25 per Package)	\$15/ea	_____
CMMI-SVC v1.3 reference card (Set of 25 per Package)	\$15/ea	_____
<b>TOTAL REFERENCE CARD PACKAGES</b>		_____

**Payment Options**

Please select a payment option. Only U.S. currency accepted.

Credit Card type:     Master Card     Visa     American Express

Credit Card # \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Print cardholder's name: \_\_\_\_\_

Invoice preferred

NOTE: Tax included when applicable

Shipping charges will be included in final total