



Cooperative Purchasing & Licensing



This form must be attached to your purchase order.

All requested information must be provided for us to process your order.

PO must be made out to: WiLS, 728 State Street, Room 464, Madison WI 53706.

Contact Person: _____

Library: _____

Street: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Email: _____ IP Range: _____

Circle prices of databases ordered.

Unique Titles	A to Z	A to Z + LinkSource	A to Z +MARC	All Three
1-6,000	855	3,800	1,710	4,655
6,001-10,000	1,283	4,750	2,565	6,033
10,001-20,000	1,710	6,175	3,420	7,885
20,001-30,000	2,565	9,500	5,130	12,065
30,001+	3,325	11,970	6,650	14,725

Save an additional 10% when paying for two years at once.

WiLS 728 State Street, Rooms 464 and B106B, Madison, WI 53706