

GED Testing Service Voucher Sales Order



Telephone: US/Canada 800.869.4101 or Latin America +952.905.7447
Fax: +1.952.487.5140 Email: PearsonVUEVoucherStore@pearson.com

Site ID: CSO # *Order Date:

To:

Organization: DSHS-State of WA

*Name: Angela Bridges

*Email: **eJASVouchersforESAFinance@dshs.wa.gov**

*Country: USA

*Full Address: PO Box 45445
Olympia, WA
98504-5445

*Phone: 360-752-4511

Fax: 360-425-4601

PO#: Restriction:

Send To: Same as

Vouchers will be sent to email address provided.

Organization: Your CSO

Name: Your name (WFPS or WFSS)

Email: Your CSO HSE e-mail address

Country: USA

Full Address: Your CSO #
Your CSO Address
City, State, Zip

Phone: Your phone number

Enter the eJAS voucher ID # here

Enter these fields exactly like this:

This is info about you and your office

Visit pearsonvue.com/vouchers/pricelist/ged.asp for current pricing

QTY	Jurisdiction - Voucher Type	Unit Price	Total
01	GED WA 100% Single-use (1 Module)	30.00	30.00

Use the drop down menu

*Currency: USD

TOTAL DUE: 30.00

METHOD OF PAYMENT

*Payment Type: AMEX MasterCard VISA Check/Bank Transfer Other

Cardholder's Name:

Card Number: Exp Date:

Cardholder's Address:

*I authorize Pearson VUE to charge this account with the "Total Due": Yes No

Don't forget to check these 2 boxes

*Authorized Purchaser Signature: Type in your name here

Type in your name; Print the Form; and then Submit. DON'T submit before Printing