



**Nebraska Grocery Industry Association**

**5935 S. 56<sup>th</sup> Street, Ste. B**

**Lincoln, NE 68516**

Phone: 402-423-5533 Toll Free: 800-433-6742 Fax 402-423-8686

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**ORDER FORM**

**Federal All-In-One Posters have been updated and new posters are now required** to keep you in compliance. Businesses are required to post 7 Federal Posters. If you ordered your Federal All-In-One Poster through our office it must be replaced as federal requirements have changed. The new posters comply with current law and include all required notices.

If you ordered your **State of Nebraska 3-In-One** poster through our office, **you do NOT** need to replace it! **The current Nebraska 3-In-One poster is up to date.** Businesses are required to post 3 State Posters. Required posters include:

1. Minimum Wage
2. EEOC
3. Unemployment Insurance Benefit Rights

**To order your Labor Law Poster, complete and forward the following information:**

*(Note: Only 1 handling fee is required per poster order, i.e. if you order 2 posters only \$5 is required for postage & handling, postage & handling is required for every other item)*

**Federal 6-In-One Poster**     \_\_\_ x \$15 each =                     \$ \_\_\_\_\_  
Postage & Handling \$5     \$ \_\_\_\_\_

**Nebraska 3-In-One Poster**     \_\_\_ x \$15 each =                     \$ \_\_\_\_\_  
Postage & Handling \$5     \$ \_\_\_\_\_

Employee Job Application Forms (Nebraska)  
\_\_\_ x \$20 each (\$15 for Forms & \$5 for Postage & Handling)                     \$ \_\_\_\_\_

Emergency Manual Flip Charts  
\_\_\_ x \$20 each (\$15 for Chart & \$5 for Postage & Handling)                     \$ \_\_\_\_\_

**Sales Tax** (on items, postage & handling) 5.5% state tax and \_\_\_ your local tax \$ \_\_\_\_\_

**Total Due** (**SALES TAX MUST** be include in payment for item to be shipped) . . . . . \$ \_\_\_\_\_

Company Name \_\_\_\_\_ Contact \_\_\_\_\_

E-mail: \_\_\_\_\_

Street Address (not PO Box) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

My check for \$\_\_\_\_\_ is enclosed

Please forward this completed form and payment to: **NGIA, 5935 South 56<sup>th</sup> Street, Suite B, Lincoln, NE 68516**