

Straighten Up America Supplies Order Form

DOCTOR'S NAME _____

CLINIC NAME _____

STREET/SHIPPING ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____ OFFICE MGR _____

<u>PRICE LIST</u>	
<i>Call for bulk pricing</i>	
<u>50 Brochures</u>	\$16.00
Ship/Hand	<u>\$ 4.50</u>
Purchase price	\$20.50
Item number SUP1	
.....	
<u>50 Decals</u>	\$18.00
Ship/Hand	<u>\$ 4.50</u>
Purchase price	\$22.50
Item number SUPD	
.....	
<u>Kit: 50 Brochures, 50 decals,</u>	
<u>1 CD</u>	\$30.00
Ship/Hand	<u>\$ 7.00</u>
Purchase price	\$37.00
Item number SUPK	

Indicate what supplies you wish to order:

_____ pack(s) of brochures (50/pack)

_____ pack(s) of electrostatic decals (50/pack)

_____ supply kit(s)

If you are eligible for discount, please phone your order.

Call 800-622-6309. Thank you.

Please indicate method of payment:

CHECK MASTERCARD VISA

CREDIT CARD NUMBER _____ EXP DATE _____

NAME ON CARD _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SIGNATURE _____



Return completed form with payment to:

FCER
 PO Box 400
 Norwalk IA 50211-0400
 Fax: 515-981-9427

Questions can be directed to: 800-622-6309 or www.fcer.org