

Order Your Directories, Labels, & Glossaries by Mail ...

You can use this form to order your updated supplies by mail using a check or credit card! Simply print this page on your printer and enclose a personal check, money order, or cashier's check with your order form - or fill out the credit card section completely. Your books and labels will normally ship within 24 to 48 hours of receipt and actual transit time is between 3 to 12 business days, depending upon USPS schedules. For faster service, you may also use our secure online order form at our website: www.pohly.com/order.html

Product Description	Price Each	Quantity	Extended Amount
Directory of Healthcare Recruiters (Over 1000 Contacts)	\$39.95	x	\$
Healthcare Recruiter Mailing Labels (Over 1000 Labels)	\$59.95	x	\$
Combination Package: Set of Mailing Labels + Directory (Save \$10)	\$89.95	x	\$
Glossary of Managed Care Terminology	\$24.95	x	\$
Your Name (please print):		Subtotal	\$
Shipping Address (please print):		Kansas residents only: please apply KS State Sales Tax of 5.3%	\$
City, State, & Zip (please print):		Shipping US Postal Service	\$ 6.00
E-mail (we will <u>never</u> share it):		Grand Total	\$
Your telephone number (please print):		Additional Comment:	
Method of Payment (please check one): Check Enclosed <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/>			
* Note: For all credit card purchases, please fill out all sections below including your signature. (Not necessary for purchasing with check.)			
* Name as it appears on your credit card (please print):		* Expiration Date on Card: mm/dd/yy	
* Your Billing Address (where your credit card statements are sent; please print complete address, including city, state, zip):			
* Your Credit Card Number:			
* The Security Code on the back of your credit card (normally the last 3 or 4 digits on the white signature strip on the back of the card):		Mail your completed form to: Pam Pohly Associates Publishing Dept. 2707 Woodrow, Ste. 100 Hays, KS 67601	
* Your Signature & Date (necessary for all credit purchases):			
_____ Signature		_____ Date	