IAHCE SALES ORDER FORM

| Name | Date |
|--------------|-------------|
| Address | _ Phone () |
| City and Zip | County |
| Date Needed | e-Mail |

| Item Name | Color | Qty. | Price Each | Total |
|-----------|-------|------|------------|-------|
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www.iahce.org

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| Subto | tal |

Postage & Handling.*

TOTAL

Certified Volunteer Hours / Sales Ashley Davis 1787 N. 1750th St. St. Elmo, IL 62458 Cell: 618-704-9062 dadavis8755@gmail.com

* Postage and handling will be figured and added to subtotal by the Sales Chairman. Mail or e-Mail order to the Sales Chairman whose name and address is listed on page 1 of the Guidebook. Upon receipt of your order, remit a check made payable to IAHCE, to the Sales Chairman.

Please state on your order if you need the items by a certain date. Contact your Sales Chairman if you have not received the order after two (2) weeks.