

IAHCE SALES ORDER FORM

Name _____ Date _____

Address _____ Phone () _____

City and Zip _____ County _____

Date Needed _____ E-Mail _____

Item Name	Color	Qty.	Price Each	Total

www.iahce.org

Subtotal

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.