

Publication Order Form

September 2009



To order PACER material, please detach and complete this order form.

NOTE: PACER's mission is to serve Minnesota parents. Thus, one copy of any item marked ■ is FREE to Minnesota parents of children or young adults with disabilities. ♻ items are also FREE to young adults (high school or older) from Minnesota with disabilities or their families. Please limit requests for free items to 10 or less per order.

Minnesota tax-exempt organizations that have not ordered from PACER previously are asked to enclose a copy of their tax-exempt certificate.

Shipping and handling costs are included in the prices listed. Please allow 3-4 weeks for delivery. **Rush orders** will be billed an additional amount to cover higher postage rates. **International orders** will be billed an additional amount to cover higher postage rates. Payment for international orders must be in U.S. dollars drawn on a U.S. bank.

Because PACER is a nonprofit, providing publications at minimal cost, credit memos will be issued for any necessary returns. They are valid for three months and may be used toward any item in the Publications Catalog. PACER cannot make cash refunds. Some materials produced by PACER are available upon request in alternative formats (ie: large print, Braille, audio).

Please indicate:

I am a: Minnesota parent Individual with a disability Professional or agency, school, etc. Parent from another state

If you're a parent, please indicate your child's birthdate and disability: _____

Multiply the cost of item ordered by the number of copies you're ordering to obtain total. For example, if you order two booklets costing \$3 each, write down \$6.

| Title | Page | Code | Cost | Qty | Total \$ |
|-------------------------------|-------|-------|-------|-------|----------|
| (Sample) Transition Trek Game | 11 | ST-23 | \$25 | 2 | \$50.00 |
| _____ | _____ | _____ | _____ | _____ | _____ |
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| _____ | _____ | _____ | _____ | _____ | _____ |

Ship to:
 Name _____
 Organization _____
 Address _____
 City/state/zip _____
 Phone (H) _____ (W) _____

Bill to: (if different from shipping address)
 Name _____
 Organization _____
 Address _____
 City/state/zip _____

Add the cost of all items ordered. **GRAND TOTAL:** \$ _____

Minnesota residents add 6.875% % sales tax. **SALES TAX:** \$ _____

Residents of other states pay no sales tax. **DONATION:** \$ _____

Donations to PACER are tax-deductible.

Please indicate the amount due. **TOTAL DUE:** \$ _____

Payment must be sent with order.

Purchase Orders: If your agency must receive items and an invoice before issuing a check, please indicate. **Purchase Order #** _____

Please return form and payment to:

PACER Center
 8161 Normandale Boulevard | Minneapolis, MN 55437-1044

For more information, call:
 952.838.9000 Voice | 952.838.0190 TTY
 800.537.2237 Toll-free in Greater MN | FAX 952.838.0199
 E-mail: PACER@PACER.org | **PACER.org**