



help me be healthy

2019 Fall Co-Op Order Form

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Co-Op pricing honored through September 23, 2019

| DESCRIPTION | # OF PAMPHLETS | | TOTAL PAMPHLETS | COST |
|--|---|---------|-----------------|-----------|
| | English | Spanish | | |
| Mother Series (\$1.00 each) | | | | |
| Tips for a Healthy Pregnancy | | | | \$ |
| Health Tips for New Moms | | | | \$ |
| Infant Series (\$0.45 each) | | | | |
| Birth to 6 Months | | | | \$ |
| 6 Months to 12 Months | | | | \$ |
| Child Series (\$0.40 each) | | | | |
| 1 to 1½ years | | | | \$ |
| 1½ to 2 years | | | | \$ |
| 2 to 2½ years | | | | \$ |
| 2½ to 3 years | | | | \$ |
| 3 to 3½ years | | | | \$ |
| 3½ to 4 years | | | | \$ |
| 4 to 4½ years | | | | \$ |
| 4½ to 5 years | | | | \$ |
| Shipping & Handling Cost Guide \$35 for every 1,000 copies (for within the contiguous US - please call for outside) 1-1,000.....\$35 4,001-5,000.....\$175 1,001-2,000.....\$70 5,001-6,000.....\$210 2,001-3,000.....\$105 6,001-7,000.....\$245 3,001-4,000.....\$140 7,001-8,000.....\$280 | SUBTOTAL: | | | \$ |
| | SHIPPING & HANDLING (SEE GUIDE TO LEFT) | | | \$ |
| | CREDIT CARD FEE* (IF APPLICABLE) | | | \$ |
| | FOR VIRGINIA SALES, ADD 6% TAX, UNLESS NONPROFIT STATUS | | | \$ |
| | TOTAL COST OF ORDER: | | | \$ |
| | | | | |

| | |
|---|-------------------------|
| AGENCY NAME: | |
| CONTACT NAME: | BILLING CONTACT: |
| EMAIL: | EMAIL: |
| PHONE: | PHONE: |
| FAX: | FAX: |
| SHIPPING ADDRESS (street address required for contiguous US delivery): | BILLING ADDRESS: |
| STREET ADDRESS | STREET ADDRESS |
| CITY STATE ZIP CODE | CITY STATE ZIP CODE |
| SEND PAYMENT TO: Evergreen & Co, 200 Park Avenue, Falls Church, VA 22046 | |
| PAYMENT METHOD: <input type="checkbox"/> Check payable to Evergreen & Co <input type="checkbox"/> EFT <input type="checkbox"/> Credit Card <input type="checkbox"/> Purchase Order #: | |
| FEDERAL TAX ID #: 54-1251986 <small>Sole source letters and W-9 forms available upon request.</small> | TAX EXEMPT # (VA ONLY): |
| SIGNATURE TO PLACE ORDER: | DATE OF ORDER: |
| * 4% service charge added to the total cost of all credit card orders | |
| CREDIT CARD #: | CVV: EXP. DATE: |
| NAME ON CARD: | |