



THE ADVOCATE OF NOT-FOR-PROFIT  
SERVICES FOR OLDER OHIOANS

**2006-2007 AOPHA ART & WRITING NOTE CARDS ORDER FORM**

**ORDERING INFORMATION**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Quantity: \_\_\_ x \$5 each + (15% shipping and handling cost) = total payment due: \$ \_\_\_\_\_

\*Multiple purchase discounts (please check the order amount):

\_\_\_ 5 boxes for \$20 (receive one box free) + (15% S/H at \$3) = \$23.

\_\_\_ 10 boxes for \$40 (receive two boxes free) + 15% S/H at \$6) = \$46.

*Please make check payable to FOPHA, 855 South Wall Street, Columbus, Ohio 43206-1921*

**CREDIT CARD PAYMENT**

AOPHA accepts most major credit cards:

\_\_\_ Visa \_\_\_ MasterCard \_\_\_ American Express \_\_\_ Discover

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

Total Charge: \$ \_\_\_\_\_

**For AOPHA Use Only**

Date Received: \_\_\_\_\_

Check Number: \_\_\_\_\_

Check Amount: \_\_\_\_\_

Check Date: \_\_\_\_\_

*For general questions, please contact Tim White at (614) 444-2882, ext. 26, or [twhite@aopha.org](mailto:twhite@aopha.org).*