

# FAX ORDER FORM



TO: **AHI of Indiana, Inc.**

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FROM:

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FAX #: **(314) 995-5780**

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DATE:

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## AHI FALL PREVENTION PROGRAM **Order Form**

NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_ PO # \_\_\_\_\_

Item	Quantity	Cost	Your Order	Total
<b>Message Pen</b>	25	\$ 75.00		
	100	\$ 250.00		
<b>Patient Alert Clock</b>	25	\$ 215.00		
	100	\$ 750.00		
<b>Resource Guide</b>	each	\$ 399.00		
<b>20" X 30" Posters</b> (sets only)	set of 4	\$ 175.00		
<b>11" X 17" Posters</b> (mix and match)	each	\$ 15.00		
	set of 4	\$ 60.00		
<b>Patient Education Guide*</b>	1,000	\$ 504.72		
	5,000	\$ 727.08		
	10,000	\$ 935.32		
<i>Please make check payable to:</i> <b>AHI of Indiana, Inc.</b> <b>PO Box 50346</b> <b>Clayton, MO 63105</b>			<b>Sub Total</b>	
			<b>Plus Tax</b>	
			<b>Plus S&amp;H</b>	
			<b>TOTAL</b>	

Once received, we will call and confirm your order, shipping and total cost. Terms are net 30.

You may also order by calling toll free 1 (866) 653-6660 or log on to [www.AHIincorp.com](http://www.AHIincorp.com).

\*If you are customizing your Patient Education Guide please send a high resolution (300 dpi) digital file in a .jpg, .tiff, or .eps format to [mcarroll@erwin-markeitng.com](mailto:mcarroll@erwin-markeitng.com).