

NAACP National Headquarters



4805 Mt. Hope Drive
 Baltimore, MD 21215
 Phone (410) 580-5115 or 5790

CONSTITUTION and BYLAWS ORDER FORM (February 2013 Version)

| | | | | | | | | | |
|--|-------|---------------------|---------|------------------|--|-------|---------------------|-----------------|-------------------|
| <p>Ordered By (Please Type or Print Clearly)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;">Name:</td></tr> <tr><td style="height: 20px;">Unit Name & Number:</td></tr> <tr><td style="height: 20px;">Street:</td></tr> <tr><td style="height: 20px;">City: State: Zip</td></tr> </table> | Name: | Unit Name & Number: | Street: | City: State: Zip | <p>Ship To Address (If different from "Ordered By")</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;">Name:</td></tr> <tr><td style="height: 20px;">Unit Name & Number:</td></tr> <tr><td style="height: 20px;">Street: PO Box:</td></tr> <tr><td style="height: 20px;">City: State: Zip:</td></tr> </table> <p><small>Note: Please Include street address as UPS cannot deliver to PO Boxes.</small></p> | Name: | Unit Name & Number: | Street: PO Box: | City: State: Zip: |
| Name: | | | | | | | | | |
| Unit Name & Number: | | | | | | | | | |
| Street: | | | | | | | | | |
| City: State: Zip | | | | | | | | | |
| Name: | | | | | | | | | |
| Unit Name & Number: | | | | | | | | | |
| Street: PO Box: | | | | | | | | | |
| City: State: Zip: | | | | | | | | | |

Daytime Phone: () _____
 E-mail Address: _____

| QTY | UNIT SIZE | DESCRIPTION | UNIT PRICE | TOTAL |
|-----|-----------|--|-----------------------------|-------|
| 1 | 1 | Large (8 1/2" X 11") Constitution and Bylaws for Units | \$9.00 | |
| 1 | 1 | Mini (5" X 8") Constitution and Bylaws for Units | \$7.00 | |
| | | | SUBTOTAL | |
| | | | GROUND SHIPPING (EXPEDITED) | |
| | | | TOTAL | |

| Ground Shipping (Expedited) |
|--------------------------------------|
| Delivery in 4-7 business days |
| \$30.00 to \$70.00 add.....\$8.99 |
| \$70.01 to \$100.00 add.....\$9.99 |
| \$100.01 to \$150.00 add.....\$10.99 |
| \$150.01 to \$200.00 add.....\$11.99 |
| \$200.01 & over add.....\$12.99 |

Credit Card Purposes Only

Name as it appears on Credit Card _____
 Billing Statement Address _____

 City _____
 State Zip _____
 (required) _____

1. Please enclose payment with invoice.
2. This order will be filled, once payment is received in accordance with the prices, terms, and specifications listed above.
3. Send order with payment enclosed to:
 Constitutions and Bylaws
 NAACP Finance Department
 4805 Mt. Hope Drive
 Baltimore, Maryland 21215 or fax to (410) 358-9350

Method of Payment:

- Check or Money order MasterCard Discover
 Visa American Express

Credit Card Information: Exp. Date _____
 Card No. _____

| |
|---|
| For Office Use Only Rec'd _____ Control# _____ |
|---|

Authorized Signature (as shown on credit card) Date _____