



1 Select County Check every county to include.

- | | | | | |
|------------------------------------|-------------------------------------|------------------------------------|------------------------------------|-------------------------------------|
| ☐ Baker | ☐ Deschutes | ☐ Josephine | ☐ Morrow | ☐ Wasco |
| ☐ Benton | ☐ Douglas | ☐ Klamath | ☐ Multnomah | ☐ Washington |
| ☐ Clackamas | ☐ Gilliam | ☐ Lake | ☐ Polk | ☐ Wheeler |
| ☐ Clatsop | ☐ Grant | ☐ Lane | ☐ Sherman | ☐ Yamhill |
| ☐ Columbia | ☐ Harney | ☐ Lincoln | ☐ Tillamook | |
| ☐ Coos | ☐ Hood River | ☐ Linn | ☐ Umatilla | |
| ☐ Crook | ☐ Jackson | ☐ Malheur | ☐ Union | |
| ☐ Curry | ☐ Jefferson | ☐ Marion | ☐ Wallowa | |

Total County Selected: _____

2 Choose report period 2025 is the most current annual report. Pricing is per county.

Report option	Starting period	County	Rate	Extended total
☐ Quarterly subscription	Quarter: Q1 Q2 Q3 Q4 _____	_____	\$175	\$ _____
☐ 2025 annual report	Full year	_____	\$550	\$ _____
☐ 2024 annual report	Full year	_____	\$550	\$ _____
☐ 2023 annual report	Full year	_____	\$550	\$ _____
☐ Prior-year annual report	Year: _____	_____	\$550	\$ _____

ORDER TOTAL: \$ _____ Quarterly selections renew automatically until canceled. All reports are delivered by email.

3 Purchaser and credit card information

Purchaser / organization: _____ **Attention:** _____
Mailing address: _____ **City / State / ZIP:** _____
Email: _____ **Telephone:** _____

Card type: ☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

Name of cardholder: _____ **Cardholder telephone:** _____
Card number: _____ **Expiration date:** _____
Security code: _____ (3-digit or 4-digit AMEX) **Billing address:** _____

Authorized signature: _____ **Date:** _____
Order total: \$ _____