

# NOR-CAL EMS ORDER FORM

Shipping Information		Billing Information <i>(Must match credit card info)</i>	
Name & Title:		Name & Title:	
Business Name:		Business Name:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Phone:		Phone:	
Visa or MC #:		Expiration Date:	
Signature:		Name on Card:	
P.O. #:		Check #	

	ITEM	Quantity	Unit Price	Total
<b>POLICY AND PROCEDURE ITEMS:</b>				
	<b>CD: NOR-CAL EMS POLICY AND PROCEDURE MANUAL</b>		\$ 6.00	
	<b>2006 SPORTS Packages - Revised May 2006</b>			
	<b>1) Provider Agencies/Training Officers (ALS-BLS-RF)</b>		\$ 15.00	
	DVD - 2006 SPORTS Presentation			
	CD - PowerPoint Presentation			
	CD - SPORTS Quiz			
	CD - SPORTS Answers			
	CD - Nor-Cal EMS Policy Manual (Updated 5/26/06)			
	<b>2) Individual Responders</b>		\$ 15.00	
	DVD - 2006 SPORTS Presentation			
	CD - PowerPoint Presentation			
	CD - SPORTS Quiz			
	CD - Nor-Cal EMS Policy Manual (Updated 5/26/06)			
<b>FORMS:</b>				
	* <b>PCR Forms:</b> (100 per pkg.)		\$ 10.00	
	* <b>Narrative Forms:</b> (50 per pkg.)		\$ 9.00	
<b>MISCELLANEOUS:</b>				
	<b>PATCHES Nor-Cal EMS</b>		\$ 3.50	

<p><b>Please make your checks payable to:</b></p> <p style="text-align: center;"><b>Nor-Cal EMS</b> 43 Hilltop Drive Redding, CA 96003-2807</p> <p>Phone: (530) 229-3979 Fax: (530) 229-3984</p>		<p><b>Sub-Total</b></p> <p><b>7.25% Tax</b></p> <p><b>Tax Exempt? (Include a copy of your exemption certificate)</b></p> <p><b>TOTAL</b></p>
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Nor-Cal EMS Use:		
<b>Date Order Received</b>	<b>Shipment Date</b>	<b>Initials</b>

Revised September 19, 2007. Supercedes all previous order forms.