Families Anonymous Literature Order Form

1 - Sold To / Ship To:

| Name: | |
|------------------------------|--|
| Address: | |
| City, State , Zip | |
| City, State , Zip Country | |
| Phone: | |
| eMail: | |
| Group or Cust# (Optional) | |
| Order Date: | |

2 - Items Desired

| Cat# | Title | Quan | Price | Total Price |
|------|-------|------|-------|--------------------|
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3 - Payment Calculation (Shipping Will Be Calculated by the WSO)

| Line | Item | Amount |
|------|---|--------|
| 1 | Total for all items above | |
| 2 | Illinois Orders, Add 9.25% of Line 1 (Sales Tax) | |
| 3 | Handling Fee, Add 6.5% of Line 1 | |
| 4 | Seventh Tradition Donation to WSO | |
| 5 | Total Due Now, Add Lines 1, 2, 3, and 4. (The WSO will compute shipping costs and notify you of those costs. Your order will ship when payment is received for shipping.) | |