

2011 **Where to Turn** Order Form

Name of Agency, Business or Individual (Please list complete name - no acronyms):

"Attention To" Name or Department:

Shipping Address:

City, State, ZIP * (see Sales Tax):

Billing Address (if different than shipping/mailing):

City, State, ZIP:

Contact Telephone:

Contact E-mail:

(Ensures receipt of monthly updates via our *Resource Talk* newsletter as well as future directory information.)

Product	Price	Qty	Total
<p><i>Where to Turn Plus</i> The most comprehensive guide to the social service system in King County.</p> <ul style="list-style-type: none"> • A complete guide to the social service system in King County. • More than 1,000 listings with descriptions of services provided, addresses, contact numbers, website addresses, hours of operation, eligibility criteria and fees. • Expanded to include a short description about each service, Service Pages guide users to the most appropriate referral information. • Mental Health and Care/Case Management Professional Listings. 	\$35	x	=
<p><i>Where to Turn Quick Reference</i> The Quick Reference is portable (5.4"x 8.4") and easily fits in a briefcase, purse or glovebox.</p> <ul style="list-style-type: none"> • More than 1,000 agency listings with phone numbers and addresses. • Service listings and phone numbers by topic category. 	\$15	x	=
<p><i>Where to Turn CD-ROM</i> The CD-ROM is a searchable PDF version of the Where to Turn Plus.</p> <ul style="list-style-type: none"> • The easy-to-navigate document allows you to view and search more than 1,000 listings. <p>NOTE: The document must be accessed from the CD-ROM and is not downloadable.</p>	\$15	x	=
<p>* SALES TAX is determined by shipping destination. Most of King County is 9.5% with the exception of Black Diamond, Carnation, Covington, Duvall, Enumclaw, Maple Valley, North Bend, Skykomish, Snoqualmie and unincorporated areas, where the sales tax is 8.6%. Circle the applicable tax.</p>			
SUBTOTAL			= \$
→ SALES TAX (.095 or .086)			= \$
GRAND TOTAL			= \$

Send payment IN FULL with completed order form to: Crisis Clinic c/o *Where to Turn*, 9725 3rd Ave NE, Suite 300, Seattle, WA 98115

Orders will NOT be processed without payment in full.

My enclosed check or money order is payable to Crisis Clinic.

Please charge my  or  (circle one).

Card Number _____ Exp. Date _____ CVC Code _____

Name on Card _____

Signature _____

My organization does not pay sales tax, and I have included our Sales Tax Exemption Notice.

Office Use Only

Date _____ Initials _____

Amount Rec'd _____

Check _____

Charge _____

Location Code _____