

COORDINATOR INFORMATION


SHIPPING INFORMATION

REPORT FOR DATES FROM _____ / _____ / _____ TO _____ / _____ / _____


Age	Number of Books Given	Number of Books Needed
2 Months		
4 Months		
6 Months		
9 Months		
12 Months		
15 Months		
18 Months		
2 Years		
3 Years		
4 Years		
5 Years		

ORDER RAISING READERS SUPPLIES FOR YOUR PRACTICE

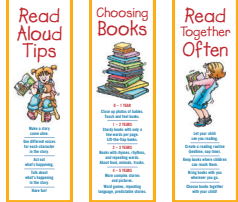
Indicate quantity for materials you need to restock:




POSTER
One Poster



BOOKPLATE
Box of 250



BOOKMARKS
Box of 100



BROCHURE
Box of 25

FAX THIS FORM TO:
(207) 761-3033

FORM COMPLETED ON _____ / _____ / _____