



ORDER FORM

<u>Description</u>	<u>Price Per Pkg.</u>	<u>Quantity</u>	<u>Total</u>
Secure Power Of Attorney (50 per Pkg.) VR-279	\$20.00 x	____ pkgs.	= _____
Secure Dealer Reassignment (100 per Pkg.) VR-182	\$20.00 x	____ pkgs.	= _____
Initial Privacy Notice Forms (100 per Pkg.)	\$15.00x	____ pkgs.	= _____
Dealer Processing Charge Brochure (100 per Pkg.)	\$21.00 x	____ pkgs.	= _____
		Sub Total	= _____
		6% MD Tax	= _____

Note: Additional \$4.00 shipping fee to send forms to residential address

TOTAL DUE _____

***All non-members of Maryland Automobile Dealers Association must enclose a check for total amount before order can be processed.

Make checks payable to Maryland Auto Dealers Services, Inc.

mail to:

7 State Circle, S-301
 Annapolis, Maryland 21401

Dealership _____

Street Address _____

City, State, Zip _____

Ordered by _____ Phone # _____

Dealer License # _____ (*required*)