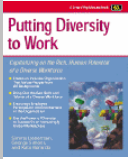






Product Order Information		
Quantity	Description	Total
_____	 Putting Diversity to Work (workbook) \$15.00  Quantity _____ x \$15 = _____ Total	
<b>Product Total</b>		
<b>Shipping UPS</b>		
<b>CA State Sales Tax 8.25%</b>		
<b>Grand Total</b>		
<b>Shipping Information</b>		
Ship To Name:		
Company:		
Phone:		
Fax:		
Ship To Address:		
City:		
State/Province/County:		
Postal/Zip Code:		
Country:		
<b>Payment</b>		
<input type="checkbox"/> Check/Money Order	Please send this order form, with your payment to:  <b>Simma Lieberman Associates</b> <b>1185 Solano Avenue PMB 142</b> <b>Albany, CA 94706</b>	
<input type="checkbox"/> Credit Card	Please fill out this form and fax it to us at:  <b>Fax: 510.527.0723</b>	

**Credit Card Payment Information**

Name on Card:	
Card Type:	<input type="checkbox"/>  <input type="checkbox"/> 
Card Number:	
Expiration Date:	
<i>I authorize Simma Lieberman to charge me for the above total and affirm that the name and information provided on this form are true and accurate.</i>	Signature:
Date:	

**Credit Card Billing Information – Leave Blank if same as Shipping**

Name as it appear on card:	
Address1:	
City:	
State/Province/County:	
Postal/Zip Code:	
Country:	

**Simma Lieberman Associates  
1185 Solano Avenue PMB 142  
Albany, CA 94706  
Fax: 510.527.0723**