Supply Order Form

Contact Information

First Name ___________________________ Last Name ___________________________

Company

Mailing Address

City ___________________________ State __________ Zip __________

Telephone ___________________________ Fax ___________________________

Email Address

To order supplies, fill out this form. Your order will be mailed to you at the address you have listed above.

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Total Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food Safety Training Kit: $100 each&lt;br&gt; (includes English &amp; Spanish versions)</td>
<td>_______</td>
</tr>
<tr>
<td>Food Safety Training Kit: Printed version only: $75 each</td>
<td>_______</td>
</tr>
<tr>
<td>CD only: $25 each</td>
<td>_______</td>
</tr>
</tbody>
</table>

ORDER TOTAL: _______ _______

Make checks payable to AMI. Cash and credit cards will not be accepted.

Send completed form to AMI
1 Massachusetts Avenue, NW Suite 800 Washington, DC 20001
Fax: 202/408-7763 Email: ami@mwmlaw.com