



**Mail order to:  
World Service Office**

PO BOX 9999

Van Nuys, CA 91409-9099 USA

Tel. (818) 773-9999 Fax (818) 700-0700

**TO BE USED IN SOUTH PACIFIC/ASIA**

**Single Purchase Discounts**

If your order totals:

- \$ .01 — \$149.00 = 0%
- \$150.00 — \$499.00 = 23.5%
- \$500.00 — \$999.00 = 25%
- \$1,000.00 — or more = 27%

**Shipping Schedule**

For orders less than \$500 add 10%

For orders more than \$500 charges will be billed.

**MAKE CHECKS PAYABLE TO NAWA, INC.**

*All purchases must be made by Cashier's Check  
or Money Order drawn in US currency.*

**TOTAL PRICE OF ORDER** \_\_\_\_\_

Subtract Discounts \_\_\_\_\_

Add Shipping and Handling Fee \_\_\_\_\_

**ORDER TOTAL** \_\_\_\_\_

**CREDIT CARD PURCHASE:** PLEASE PRINT ALL INFORMATION. YOU MAY FAX YOUR CREDIT CARD ORDER.

- VISA     AMERICAN EXPRESS     MASTER CARD     DISCOVER CARD     DINERS CLUB

CREDIT CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

LAST NAME OF CREDIT CARD HOLDER \_\_\_\_\_ FIRST NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Bill to:** PLEASE PRINT ALL INFORMATION. DO NOT ABBREVIATE STREETS OR CITIES.

NAME \_\_\_\_\_

PO No \_\_\_\_\_ ATTENTION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ EXT. \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

PLEASE INCLUDE A DAYTIME PHONE NUMBER, WITH EXTENSION, AND YOUR FAX NUMBER AND/OR EMAIL.

**Ship to:** PLEASE PRINT ALL INFORMATION. DO NOT ABBREVIATE STREETS OR CITIES.

NAME \_\_\_\_\_

PO No \_\_\_\_\_ ATTENTION \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ EXT. \_\_\_\_\_ FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

CUSTOMER ID (found in the upper right corner of invoice) \_\_\_\_\_

PLEASE INCLUDE A DAYTIME PHONE NUMBER, WITH EXTENSION, AND YOUR FAX NUMBER AND/OR EMAIL.

**NOTE: SHIPMENT BY DHL OR FEDERAL EXPRESS IS AT CUSTOMER'S EXPENSE.**

**NOTE: DELIVERIES TO PO BOXES MUST BE PICKED UP WITHIN SEVEN DAYS OR THEY WILL BE RETURNED TO THE WSO.  
RETURN SHIPPING WILL BE AT CUSTOMER'S EXPENSE. THANK YOU FOR YOUR COOPERATION.**

**ALL PRICES ARE SUBJECT TO CHANGE WITHOUT NOTICE**

If ordering for a group, area, region,  
treatment or correctional facility, please indicate.

Indiv./Grp.     Area     Region     Organization    NAME \_\_\_\_\_