

KIT FOR NEW PARENTS

ONE-TIME ORDER FORM

New Order Change Order Cancel Order

PLEASE SHIP TO:

DATE KITS NEEDED:

Allow one-week for delivery

Contact Name

Receiving Name

Organization/Title

Receiving Department

Address (**NO** P.O. Box)

Phone Number

Fax Number

City

Zip

E-mail

Special Shipping Instructions: Can accept Kits on Pallets Loading dock available Must have prior delivery appointment by phone

Other: _____

QUANTITIES REQUESTED:

Note: All changes and/or cancellations can only be implemented if Kits have not been shipped.

- **ONE-TIME ORDER**

Send _____ English Kits

Send _____ Spanish Kits

Send _____ Vietnamese Kits

Send _____ Korean Kits

Send _____ Chinese Kits - Mandarin

Send _____ Chinese Kits - Cantonese

Note: For subscription orders (monthly deliveries), please complete a *Kit for New Parents Subscription Form* posted on the Commission web site

AUTHORIZATION:

Signature of County Commission Staff

Date

RETURN COMPLETED FORM TO:

FAX: (916) 876-5877 **OR**

MAIL TO: First 5 Sacramento, 2750 Gateway Oaks Drive, Suite 330, Sacramento, CA 95833

For questions, please contact: Debra Payne (916) 876-5870

paynade@saccounty.net

www.First5Sacramento.net