

**Matrix Model Manual Order Form**

**Culturally Adapted Client Handouts  
For American Indians & Alaskan Natives**

**Contact Information**

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

<u>Manuals</u>	<u>Price</u>	<u>Quantity</u>	<u>Amount</u>
<i>Culturally Adapted Client Handouts For American Indians/Alaskan Natives</i>	\$149	_____	\$ _____
<small>(to be used in conjunction with the Matrix Model Manual of Intensive Outpatient Treatment)</small>			
Sales Tax: 9.25% (CA residents only)			\$ _____
Shipping: Add \$20 for orders up to \$750 Add \$35 for orders over \$750			\$ _____
TOTAL AMOUNT DUE			\$ _____

**Payment Information**

Payment Method: VISA MC Check (Ck# \_\_\_\_\_)  
 Credit Card Number: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_ CVV # (last 3 digits on back): \_\_\_\_\_  
 Cardholder's Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**Shipping Address: (If different from Contact Information)**

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