



# Order Form

870 E. Higgins Rd. #131  
 Schaumburg, IL 60173  
 ph: 847-240-0027  
 fax: 847-240-0028

## Information (please print)

Name	
Organization	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	

Qty	Item	Each	Total
	Drunk Driving...The Victim/The Offender Video (DVD)		
	Salvando Vidas Spanish Video		
	The Story of AAIM Video		
	Victim Impact Panel Video (English)		
	Victim Impact Panel Video (Spanish)		
	AAIM Victim Panel (CD)		
	Faces of Tragedy Book		
	AAIM Benefit CD		
<b>Contact the AAIM office for availability of items and pricing.</b>		<b>+ S/H</b>	
		<b>Total</b>	

## Payment Information

I plan to make this contribution in the form of:

\_\_\_ check \_\_\_ check #.

\_\_\_ credit card

Name on Card	
Credit card type	<input type="radio"/> Visa <input type="radio"/> MC
Credit card number	
Expiration date	
Authorized signature	