



## AAA & CAD Patient Education Brochures

Brochure Description	SVS Member Price Per Box (100)	Non-Member Price Per Box (100)	# Boxes	Total Cost
<i>Learn the Facts on Abdominal Aortic Aneurysm</i>	\$60.00	\$75.00		
<i>Learn the Facts on Carotid Artery Disease</i>	\$60.00	\$75.00		
			<b># of Labels</b>	
<b>Individualize Patient Education Brochures</b> Space is provided on each brochure under the "Learn more about your vascular health" section to affix a clear label with your contact information. You may also include the SVS member logo if you are an SVS member.	<input type="checkbox"/> Set-up fee: \$15.00			
	<input type="checkbox"/> 90 labels: \$9.00			
	<input type="checkbox"/> 150 labels: \$15.00			
	<input type="checkbox"/> 240 labels: \$24.00			
	<input type="checkbox"/> More than 240 labels: \$3.00 per 30 labels			
	<input type="checkbox"/> I am an SVS member and would like the SVS member logo printed on my labels.			
<b>Subtotal</b>				
<b>*Shipping/Handling</b>				
<b>Illinois residents add 10.25% sales tax; Virginia residents add 5.0% sales tax</b> <i>Organizations that are exempt from sales tax must notify SVS before placing an order.</i>				
<b>Total Amount Due</b>				
<b>Bulk rate pricing:</b> Bulk rates are available for orders of 3,000 or more brochures. Call 312-334-2300 for rates.				
<b>*Shipping and Handling Fees</b> <input type="checkbox"/> U.S. Standard Shipping = \$15.00 for 1 box; \$5.00 for each additional box. Ships within two weeks. <input type="checkbox"/> Outside U.S. Standard Shipping (7-14 days) = \$25.00 for 1 box; \$15.00 for each additional box. <b>Overnight and Two-Day Shipping:</b> Call 312-334-2300 for fees.				

SVS Member Name \_\_\_\_\_ (If SVS member, please include name in order to receive member price.)

Contact Person (for order) \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

**Ship to**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_

**For individualized label orders only**

Please clearly print the exact information you want on your labels. You are limited to four lines of text on a 1" x 2 3/4" label.

Line 1: \_\_\_\_\_ Line 2: \_\_\_\_\_

Line 3: \_\_\_\_\_ Line 4: \_\_\_\_\_

**Payment**

Check made payable to the Society for Vascular Surgery (requires an additional 3-5 days for processing)

**Mail check & order form to address below:**

Society for Vascular Surgery (no credit cards) 38678 Eagle Way Chicago, IL 60678-1386	Pay by Fax (credit card orders only) 312-334-2320
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**Questions?**  
Please call 312-334-2300 or email  
[communications@vascularsociety.org](mailto:communications@vascularsociety.org)

Visa  MasterCard  American Express

Name on Credit Card \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_