



SMOKE FREE NEW MEXICO
Improving the state of our health.



Materials Order Form

Forma para ordenar materiales

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Items Requested

Quantity

- | | |
|--|-------|
| <input type="checkbox"/> No smoking sign (adhesive) | _____ |
| <input type="checkbox"/> Full-sheet size information handout | _____ |
| <input type="checkbox"/> Business card-size info handout <i>(available after August 1)</i> | _____ |
| <input type="checkbox"/> Half-sheet size info handout <i>(available after August 1)</i> | _____ |
| <input type="checkbox"/> Business owner brochure <i>(available after August 1)</i> | _____ |
| <input type="checkbox"/> Table tent <i>(available after August 1)</i> | _____ |
| <input type="checkbox"/> Coaster <i>(available after August 1)</i> | _____ |

Submit order online at SmokeFreeNM.com or fax this completed form to 505-266-9513

Envíe su orden por internet en SmokeFreeNM.com o envíe esta forma completa por fax al 505-266-9513