* Order Form for Agencies Using Federal Quota Funds *

American Printing House for the Blind, Inc.

Phone: 502-895-2405 * FAX: 502-899-2274 * Toll Free: 800-223-1839

E-mail: info@aph.org

NYS Resource Center for VI Use Only					
Signature of Ex Officio Trustee: Note: The Signature of the Ex Officio Trustee (hand signature)	gned or stamped) must appear above.				
Ship To:	Bill to: NYS Education Department 2A Richmond Avenue Batavia, NY 14020 E-Mail: lisa.desantis@nysed.gov Phone: (585) 343-5384 ext. 207 Fax: (585) 343-0652				

APH Catalog #	Qty.	Description of Product	Price Each	Net Amou	nt
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	
				\$ -	

Total \$ -