



## Cesar Chavez Day 2009 Poster Request Form

### CONTACT INFORMATION

Name of Organization/School: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### NUMBER OF COLLATERAL MATERIALS

Number of Chavez Day Posters Requesting: \_\_\_\_\_ Cost: FREE\*  
(Note: Initial request limited to 50)

### SHIPPING INFORMATION

**\*ORGANIZATION/SCHOOLS ARE RESPONSIBLE FOR COVERING THE COST OF SHIPPING. PLEASE PROVIDE SHIPPING INFORMATION BELOW. (Credit Card or Shipping Account # Only)**  
**\*Estimated Shipping Cost: \$10 - \$15 for maximum order shipping to California locations. Out of state orders may exceed above freight estimate. If you do not have a Shipping Account, you may use a Credit Card by following the instructions in brackets below.**

Receiver's Shipping Company: \_\_\_\_\_  
(or Credit Card Company, ex. VISA, MasterCard, American Express)

Billing Account #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
(or Credit Card #)

Account Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(or Name on Credit Card)

Billing Address: \_\_\_\_\_  
(or Credit Card Billing Address)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Send Order Request to Either of the Following:

**Mail:**  
Peggy Yount  
Priority Pak  
12720 Wentworth Street  
Arleta, CA. 90039

**Phone:**  
(818) 768-2777 ext. 21

**E-mail:**  
chavezday@prioritypakit.com

**Fax:**  
(818) 768-8877

### CESAR E. CHAVEZ FOUNDATION

634 S. SPRING STREET, SUITE 400, LOS ANGELES, CA 90014

PHONE: 213 362 0260 FAX: 213 362 0265

<http://chavezfoundation.org> [info@cecfmail.org](mailto:info@cecfmail.org)