

Cape Cod Disability  
Youth Poster 2010 Calendar  
Order Form  
\$15.00 each - Shipping & Handling (S&H) \$3.00 each

Name: \_\_\_\_\_

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

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Quantity: \_\_\_\_\_ Amount: \_\_\_\_\_ S&H: \_\_\_\_\_

Mail to: JAM Specialists  
P.O. Box 1159  
S. Dennis, MA 02660

Make checks payable to: JAM Specialists Inc.

Total: \$ \_\_\_\_\_