

SINCLAIR, TOWNES & COMPANY
 2024 YEAR-END GIVING BROCHURES &
 PLANNED GIVING BROCHURES ORDER FORM

How to place your order:

Online: nonprofitfundraisingconsulting.com

Email: info@sinclaiertownes.com

Mail: Post Office Box 28716, Atlanta, GA 30358

Questions? Call us at (770) 988-8111 or email us.

<i>Brochure</i>	<i>Quantity</i>	<i>Price each</i>	<i>Total</i>
2024 Year-End Gift Ideas			
What a Will Can Accomplish			
Preparing Your Will			
How To Personalize Your Will			
Reviewing Your Financial Plan			
Estate Planning Beyond Your Will			
Financial & Estate Planning for Women			
Planned Giving Opportunities			
Five Planned Giving Options			
Gifts of Stock			
Gifts of Life Insurance			
Charitable Remainder Trusts			
Charitable Gift Annuities			
		SUB-TOTAL	\$
+ Personalization (if desired) (\$225 total for all brochures ordered together)		+ \$225 for personalization (if desired)	
		TOTAL	\$

Please provide personalization information below (if desired):

BROCHURE PRICING

Prices are for the number of copies of the same title.

500 – 999 brochures	\$1.19 each
1,000 – 2,499 brochures	\$0.79 each
2,500 – 4,999 brochures	\$0.59 each
5,000 – 9,999 brochures	\$0.51 each
10,000 or more brochures	\$0.45 each

Our prices include FREE shipping and handling! Most orders ship within 5 days of your approving your personalized proof! RUSH orders available at an additional charge.

Optional personalization at \$225 includes:

- Color (or black and white) imprinting of your logo and your contact information on the front cover
- Customized photos or other graphics, if desired

Once your order is received, we will email you a proof for your approval. Please email all logos, images, graphics in at least a 300 dpi jpeg PC format file to:

info@sinclaiertownes.com

Your shipping address (if different than billing address:

Payment Information & Authorization:

_____ Check enclosed.

_____ Please charge our credit card below.

Organization name:

Your name:

Title:

Telephone:

Email address:

Credit card billing address, if different than shipping address:

Please charge our: ___ Mastercard ___ Visa ___ AmEx

Credit card number:

Expiration date: _____ CSC: _____

Name on card:

Authorized signature:

THANK YOU FOR YOUR ORDER!