



ORDER FORM

| <u>Description</u> | <u>Price Per Pkg.</u> | <u>Quantity</u> | <u>Total</u> |
|---|-----------------------|--------------------|--------------|
| Secure Power Of Attorney (50 per Pkg.) VR-279 | \$20.00 x | ____ pkgs. = | _____ |
| Secure Dealer Reassignment (100 per Pkg.) VR-182 | \$20.00 x | ____ pkgs. = | _____ |
| Initial Privacy Notice Forms (100 per Pkg.) | \$15.00x | ____ pkgs. = | _____ |
| Dealer Processing Charge Brochure (100 per Pkg.) | \$21.00 x | ____ pkgs. = | _____ |
| | | Sub Total = | _____ |
| | | 6% MD Tax = | _____ |

Note: Forms must be sent to licensed business address if licensed address is your residence, please add \$4.00 additional shipping cost

add'l shipping (if applicable) _____

TOTAL DUE _____

***All non-members of Maryland Automobile Dealers Association must enclose a check or money order for total amount before order can be processed.

Make checks payable to Maryland Auto Dealers Services, Inc.

mail to:

7 State Circle, S-301
Annapolis, Maryland 21401

Dealership _____

Street Address _____

City, State, Zip _____

Ordered by: _____ Phone# _____ Email _____

Dealer License # _____ (required)

Effective 5/1/13 Revised 10/04/18