



BROCHURES AND PUBLICATIONS ORDER FORM

Brochures (sold in sets of 25) MEMBERS ONLY	# OF SETS	PRICE	TOTAL
Real Estate Attorneys: Essential Partners for Real Estate Agents	..... x	\$43.75	= \$.....
Real Smart Real Estate: An Educational Series			
1. The Real Estate Attorney	..... x	\$11.25	= \$.....
2. Title Insurance	..... x	\$11.25	= \$.....
3. Real Estate Professionals	..... x	\$11.25	= \$.....
4. Mortgage Options	..... x	\$11.25	= \$.....
5. Glossary	..... x	\$11.25	= \$.....
Customize your Real Smart Real Estate brochures (\$5.00 per set)	..... x	\$5.00	= \$.....
• Include your name and firm information using the order form below			
• See sample on back			
Acrylic Holder for Real Smart Real Estate Brochures	..... x	\$25.00	= \$.....
Total Brochures (sales tax, shipping and handling included)			TOTAL \$.....

Manuals/Handbooks	QTY	PRICE MEMBER	QTY	PRICE NON-MEMBER	TOTAL
FR/BAR Contract Preparation Manual	..... x	Member \$20.00	..... x	Non-Member \$30.00	= \$.....
Fund Procedures Handbook	..... x	Member \$23.00	..... x	Non-Member N/A	= \$.....
Standard Commitment Clauses (Not available to non-member)	..... x	Member \$20.00	..... x	Non-Member N/A	= \$.....
Fund Title Notes					
Fund Title Notes and Standard Commitment Clauses on CD	..... x	Member \$50.00	..... x	Non-Member N/A	= \$.....
Fund Title Notes on CD	..... x	Member \$50.00	..... x	Non-Member \$100.00	= \$.....
Fund Title Notes, including Binder & Inserts (8 x 11)	..... x	Member \$115.00	..... x	Non-Member \$300.00	= \$.....
Fund Title Notes Entire Contents (Replacement Pages)	..... x	Member \$95.00	..... x	Non-Member \$200.00	= \$.....
Binder Only	..... x	Each \$20.00	..... x	Each \$20.00	= \$.....
Total Manuals/Handbooks (sales tax, shipping and handling included)					TOTAL \$.....

TOTAL ORDER \$.....

Shipping Information / Customized Order Information (Please print clearly)
Check box to include information on your brochures (for customized orders only)

Name: _____

Firm Name: _____

Website: _____

Shipping Address (no P.O. boxes, please): _____

City: _____ State: _____ Zip: _____

Telephone: _____ Member #: _____

Email: _____

Other Delivery/Custom Order Instructions: _____

Payment Options	Required Information for Credit Card Payment
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<input type="checkbox"/> Please charge my Member Account <input type="checkbox"/> Check enclosed Please make check payable to: Attorneys' Title Fund Services, LLC Mail this form and your check to: Attorneys' Title Fund Services, LLC Real Estate Resource Order P.O. Box 628601 Orlando, FL 32862-8601	Please charge my credit card: <input type="checkbox"/> MasterCard® <input type="checkbox"/> Visa® <input type="checkbox"/> American Express® <input type="checkbox"/> Discover® Card # _____ Security Code _____ Exp. Date _____ <small>(3 digit on back of Visa and MC, 4 digit on front of AMEX)</small> Print name as it appears on card _____ Cardholder's Signature _____ Credit Card Billing Address _____ City _____ State _____ Zip _____
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Photocopies of this order form are acceptable.
Please allow 15 business days for delivery.
Note: For tax exempt certificate holders, deduct 6.5% tax from the sales price and submit a copy of Tax Exemption Certificate with order form.

Fund Use Only				
Date	Check #	\$ Amt. Due	\$ Amt. Paid	\$ Bal. Due