



NYSAC
NEW YORK STATE
ASSOCIATION OF COUNTIES

**ORDER FORM/INVOICE/CREDIT CARD FORM
FOR NYSAC DIRECTORY AND/OR MAILING LIST**

- NYSAC Annual County Directory (print format)
- NYSAC Mailing List (electronic list)
- NYSAC Mailing List (mailing labels)

DIRECTORY PURCHASE DETAILS

- Cost to county officials: \$35 per copy
 - Cost to non-members: \$75 plus \$5 shipping and handling per copy
- Please send me _____ copies of the directory for a combined total of \$ _____
(include all S&H costs).

MAILING LIST PURCHASE DETAILS

Please check one and indicate the list category you would like to receive – e.g., supervisors, board chairs, executives, mental health commissioners, etc. Please note that the cost is based on a one time use only.

- Electronic list (Excel File) \$75
- Mailing labels \$75

List categories: _____ for a total of \$ _____

ORDER TOTAL: \$ _____

Name: _____
County: _____
Address: _____
E-mail: _____
Phone: _____

Pay by: **Check** (make payable to NYSAC and mail to
NYSAC County Directory, 540 Broadway, 5th Floor, Albany, NY 12207)

or Credit Card

- Visa** **Mastercard** **American Express** **Discover**

Name on card: _____

Account number: _____

Expiration date: _____

CSC Code (3 digit number on the back of card, 4 digit number of front of AMEX cards) _____

AMEX 4 digit security code on back of card _____

Signature _____

Credit card orders can fax this form to 518-465-0506.