

**Household Matters Toolkit Order**  
**From**  
**The Foundation of Aging and Care of Elders of Kansas**  
**(FACE of Kansas)**



**In associate with KHCA/KCAL**

**DATE:** \_\_\_\_\_

**ORDERED BY:**

**Name/Title:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**SHIP TO:** (Please Print)

**Facility/Company:** \_\_\_\_\_

**Company Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Name of Item Ordered**

	<b>Quantity</b>	<b>Price</b>	<b>Total</b>
Home Matters ToolKit	700		

**Subtotal** \_\_\_\_\_  
**S/H \$28/Kit** \_\_\_\_\_  
**SubTotal** \_\_\_\_\_  
**Tax** \_\_\_\_\_ % \_\_\_\_\_  
**Total** \_\_\_\_\_

Send your order to: FACE of Kansas c/oKansas Health Care Association 117 SW 6<sup>TH</sup> Ave., Suite 200, Topeka, KS 66603; email: kpoole@khca - Phone: 785/267-6003 - Fax: 785/267-0833

**When paying in advance, please remember to add sales tax and shipping/handling**