



INDIANA UNIVERSITY

SCHOOL OF MEDICINE

Drug Interactions Card Request Form

Please complete the order form and email to Cornelia Davis-Moore at cdavismo@iu.edu or fax to (317)-274-2766. When your order is received, we will email you an invoice with payment instructions. Once payment is received, the cards will be mailed to you.

Today's Date:

Company:

First Name:

Last Name:

Degree:

Title:

Address

City

State

Zip

Country

Email

Telephone

Fax

Number of cards required:

10

25

50

100

Other

Pricing (\$USD)

Quantity	Single-Issue Purchase	Shipping and Handling
10-50 cards	\$4.00 per card	\$4.00
51-100 cards	\$4.00 per card	\$9.00
101-250 cards	\$3.00 per card	\$18.00
251-500 cards	\$3.00 per card	\$25.00
501+	\$2.00 per card	\$35.00