

## Subscription Certificate—Imprinted Newsletters

Mail or fax order to:

**Circulation Manager**  
**YourLaw Subscription**  
**American Bar Association**  
**321 N. Clark, 20.2**  
**Chicago, IL 60610**  
**Fax: 312/988-5494**

Any questions? Call Colleen Danz at 1-800-238-2667 (dial 5734 at the prompt) or 312-988-5734, or send an e-mail to [danzc@staff.abanet.org](mailto:danzc@staff.abanet.org)

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### Circle Order Option and Quantity

#### IMPRINTED SUBSCRIPTIONS

Please send me a one-year subscription to YourLaw (4 issues a year) and imprint my firm's name, address, and phone and fax numbers (and e-mail address if desired) on YourLaw, in the quantity indicated below (other quantities also available).

100-copy subscription (400/year): \$ 295.00  
250-copy subscription (1,000/year): \$550.00  
500-copy subscription (2,000/year): \$795.00  
750-copy subscription (3,000/year): \$1,190.00  
1,000-copy subscription (4,000/year): \$1,450.00  
1,500-copy subscription (6,000/year): \$1,897.00  
Other quantity (Call for price): \_\_\_\_\_, Price: \_\_\_\_\_

#### FOLDING SERVICE

YourLaw can be folded in half or in thirds to fit a #10 envelope. The charges for folding are \$ 25.00 for the first 250 copies, and \$ 5.00 for each additional 100. Charges for folding are invoiced per quarter.

If you would like us to fold your newsletter, please indicate whether thirds or in half:

- Fold my newsletters in half.  
 Fold my newsletters in thirds (fits a #10 envelope).  
 I do not want my newsletters folded.

#### IMPRINT EDITS

Changes to imprints should be faxed or emailed to Circulation Manager (please include an email address with your request). Changes to imprints will incur a \$50 proof charge.

[Please continue on next page.]

**Please check one of the following:**

- Match the enclosed letterhead/sample**  
 **I would like imprint to read exactly as follows:**

\_\_\_\_\_  
**Firm**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City/state/zip**

\_\_\_\_\_  
**Phone (    )                    / Fax (    )**

\_\_\_\_\_  
**E-Mail**

**Prepayment by check, money order, or credit card required.**

\_\_\_\_\_  
**Promotion Code (Leave blank if none)**

**Check/money order enclosed made payable to American Bar Association.**

**Please indicate the Billing address if different than above:**

\_\_\_\_\_  
**Firm**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City/state/zip**

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**Phone (    )                    / Fax (    )**

**[Please continue on next page.]**

**Please indicate the Shipping address if different than above:**

\_\_\_\_\_  
**Firm**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**City/state/zip**

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**If you pay by credit card, mail the form back to us or fax it to 312/988-5494.**

**Charge to (circle one):**

**VISA**

**MasterCard**

**American Express**

\_\_\_\_\_  
**Acc#**

\_\_\_\_\_  
**Exp. date**

\_\_\_\_\_  
**Name on Card**

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