



# Autism Sharing & Parenting Inc.

Parents Empowering Parents to Help Their Children Evolve

## Purchase Order Form

Order By or Ship To Information	
Name:	
Address:	
City, State, Zip Code:	
E-Mail Address:	
Day Phone:	
PM Phone:	

Item	Quantity	Price Each	Total
<b>Subtotal</b>			
Shipping and Handling			
<b>Total</b>			

### Check or Money Order

Make payable to Autism Sharing and Parenting, Inc.

### Upon Completion, mail this form with Check/Money Order to:

Autism Sharing and Parenting, Inc.  
555 West Abbottsford Avenue  
Philadelphia, PA 19144