

Date: _____

INVOICE

Bylaws Toolkit, Updated 2009 Edition

Name _____

Company Name _____

Address _____

Phone _____

Email Address _____

Amount Due (select one):

Member \$35.00 | Non-Member \$55.00

Make checks payable to: Community Action Program Legal Services, Inc.

Submit PAYMENT and INVOICE to:

CAPLAW
178 Tremont Street, 10th Floor
Boston, MA 02111

Delivery: Upon receipt of payment, a PDF of the *Bylaws Toolkit* will be sent to the email address provided above.