



# State Bar of Georgia

## Consumer Pamphlet Series Order Form

The Consumer Pamphlet Series is available at cost to Bar members, non-Bar members and organizations. Pamphlets are sold in packs of 25. Questions? Call (404) 527-8792.

To expedite your order, we encourage you to visit the Bar's online store at [www.gabar.org/storefront](http://www.gabar.org/storefront).

| # of Packs | Title  | Price per pack | Cost |
|------------|--|----------------|------|
|            | Auto Accidents   | x \$6.25 =     |      |
|            | Bankruptcy   | x \$6.25 =     |      |
|            | Buying a Home  | x \$6.25 =     |      |
|            | Divorce  | x \$6.25 =     |      |
|            | How to be a Good Witness                                 | x \$6.25 =     |      |
|            | How to Choose a Lawyer                                   | x \$6.25 =     |      |
|            | Juror's Manual   | x \$6.25 =     |      |
|            | Lawyers and Legal Fees                                   | x \$6.25 =     |      |
|            | Legal Careers  | x \$6.25 =     |      |
|            | <del>Living Wills and Durable Powers of Attorney</del> * | x \$6.25 =     |      |
|            | Wills  | x \$6.25 =     |      |
|            | Legal Rights of Nursing Home Residents                   | x \$18.75 =    |      |
|            | Patents, Trademarks & Copyrights                         | x \$18.75 =    |      |
|            | Selecting a Nursing Home                                 | x \$18.75 =    |      |
|            | Selecting a Personal Care Home                           | x \$18.75 =    |      |

\* temporarily unavailable

Shipping and Handling = 2.00

Subtotal = \_\_\_\_\_

\*\*Georgia Sales Tax = \_\_\_\_\_

TOTAL AMOUNT DUE = \_\_\_\_\_

### Ship to:

Name: \_\_\_\_\_ Bar #: (if applicable) \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ e-mail address: \_\_\_\_\_

### Payment:

I enclose a  Check  Money Order in the amount of \$ \_\_\_\_\_

Please bill my  Visa  MasterCard  American Express \$ \_\_\_\_\_. Complete information below.

Name (as it appears on card) \_\_\_\_\_

Account Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Please return this form with payment to:

Communications Department  
State Bar of Georgia  
104 Marietta St. NW, Suite 100  
Atlanta, GA 30303

Fax: 404-527-8717 **(Credit card orders only)**

Please allow 2 weeks for delivery

\*\*on shipments to Georgia only. Applicable sales tax rates, by county, may be found at [www.etax.dor.ga.gov/salestax](http://www.etax.dor.ga.gov/salestax), or call 404-527-8792.