



## CODI Order Form

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Method of Payment:     Check     Credit Card (Check one)

    Visa

    MasterCard

    American Express

Credit Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Security Code (last three numbers on the back of the card): \_\_\_\_\_

(Checks can be made payable to CODI)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Item	Quantity	Description	Unit Price	Total
			<b>Total Amount</b>	

**Standard shipping and handling rates apply.**

Thank you for your generous support!

Career Opportunity Development, Inc.  
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