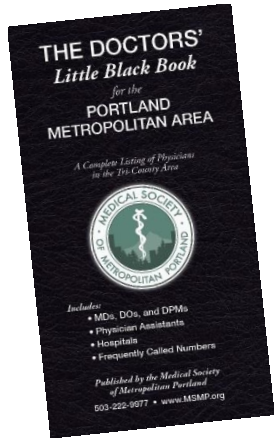


NEED ANOTHER COPY?



THE DOCTORS' Little Black Book for the PORTLAND METROPOLITAN AREA 2020 – 2021

YES! Please process my order for the
2020 – 2021 Little Black Book

Quantity: _____ x \$25 = Total \$ _____ **ALL ORDERS MUST BE PRE-PAID**

Company: _____

Attention: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Payment Methods:

Mail: Make checks payable to **MSMP – The Doctor’s Little Black Book**, mail to PO Box 19388, Portland, OR 97280

Email/Fax: Complete the details below, e-mail to janine@msmp.org or fax to (503) 222-3164

Visa/MasterCard: _____ Exp Date: _____

Name on Card: _____ Code: _____

Signature: _____