

**United Way
of Deschutes County**



Order Form for Family Wize Prescription Discount Cards

Company Information (please print or type)

Name	
Address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
Fax	
E-Mail	
Number of cards needed	
Date of request	
Comments or Special Instructions	

Please fax your completed order form to (541) 385-1742 or send via e-mail to info@deschutesunitedway.org