

Order Authorized by: ____

Cribs Hospital Initiative

PRODUCT ORDER FORM 2015

5450 Second Avenue Pittsburgh, PA 15207 Phone: 412.322.5680 x7 Fax: 412.246.0705 bclemons@cribsforkids.org

Bill To: PLEASE PRINT LEGIBLY **Ship To: PLEASE PRINT LEGIBLY Company Name Company Name Address Address Contact Person Contact Person Telephone # Telephone # E-mail ____ E-mail Purchase Order # Date Issued Requested Ship Date **Shipping Instructions UPS Ground shipping charges will be billed to customer's order. If all product is not in stock, is a partial shipment with backorder ok? Y _____ N ____ Partial shipments will likely incur additional shipping charges. Special Instructions: Payment Method Visa ____ MC ____ Discover ____ American Express ____ Cardholder Name ___ Address as it appears on credit card statement_____ Exp. Date Card # Pay by Invoice (Net 30 Days) _____ Pay with Funds on File Pay by Check # ITEM DESCRIPTION UNIT COST TOTAL ITEM# 8 Steps for Safe Sleep 11x17 Poster (African American Baby) HIAA15 *English and Spanish on Poster .30 8 Steps for Safe Sleep 11x17 Poster (Caucasian Baby) HIC15 *English and Spanish on Poster .30 8 Steps for Safe Sleep 8.5x11 Poster (African American Baby English) **HIAA15-8 .20 8 Steps for Safe Sleep 8.5x11 Poster (African American Baby Spanish) .20 HIAAS15-8 8 Steps for Safe Sleep 8.5x11 Poster (Caucasian Baby English) 20 HIC15-8 8 Steps for Safe Sleep 8.5x11 Poster (Caucasian Baby Spanish) 20 HICS15-8 Safe Sleep for Your Baby Door Hanger (African American Baby) HIAADH15 *English on one side and Spanish on the other 45 Safe Sleep for Your Baby Door Hanger (Caucasian Baby) HICDH15 *English on one side and Spanish on the other .20 Safe Sleep Certificate SSC15 .20 NICU Safe Sleep Certificate NICUS15 To provide documentation and avoid discrepancies, please complete this form and fax to 412.246.0705. For customer assistance, please call 412.322.5680, ext. 107 or email belemons@cribsforkids.org SHIPPING BALANCE Updated Mar 2015 DUE

__ Print name: __

Complete email address to have invoice emailed, otherwise we will mail invoice to the "bill to" address.



EDUCATIONAL PRODUCT ORDER FORM

2016

5450 Second Avenue Pittsburgh, PA 15207 Phone: 412.322.5680 x7 Fax: 412.246.0705 bclemons@cribsforkids.org

	de	SHIPPING ADDRESS: Please Print Legibly Company Name Address, City, State, Zip Code		
Telephone #		Contact Person Telephone # E-mail		
Date Issued	Requested Ship Date	Purchase Order #		
		er ok? Y 🗌 N 🔲 Partial shipments will likely incur additional shipping charges.		
Payment Method				
MINING THE CONTRACTOR OF THE C	Pay with Funds on File □	Pay by Invoice (Net 30 Days) □		
Visa ☐ MC ☐ Discover ☐ Address, City, State and Zip	American Express ☐ Cardholder Code as it appears on credit card	Name I statement		
Card #		Exp. Date		

ITEM#	ITEM DE	SCRIPTION		QTY	UNIT COST	TOTAL
ABCB12	"ABCs of Safe Sleep" Brochure	English	Spanish		.50	
CFKSSB12-1	"Safe Sleep for Your Baby Brochure"	English	Spanish		.50	
PFM08	New "ABC" Photo Frame Magnet	English	Spanish		.70	
TC14	Temperature Card	English	Spanish		1.25	
SC14	"When You Smoke, So Do I" Card	English	Spanish		.25	
GP14	"Safe Sleep for Your Grandbaby" Card	English	Spanish		.25	
PID08	Cribs for Kids® Instructional Video and Safe Sleep 30-second PSA on DVD				10.00	
SSD08	"Safe Sleep for Your Baby Right from the Start" DVD				20.00	
SPSSD08	Spanish Safe Sleep DVD (Not the same as Safe Sleep DVD above)			02000/2019	15.00	
HHRG	Healing Hearts Infant Bereavement Resource Guide				5.00	
SSP13	Safe Sleep Pen with Six (6) Safe Sleep Messages				1.50	
SSFP13	Safe Sleep Educational Flip Chart			25.00		
	To provide documentation and avoid discrepancies, please complete this form and fax to 412.246.0705. For customer assistance, please call 412.322.5680, ext. 107 or email belemons@cribsforkids.org			SHIPPING		
REVISED 2/2015					BALANCE DUE	

Order Authorized I	by: Print name:
·	Complete email address to have invoice emailed, otherwise we will mail invoice to the " bill to" address.



NON-PARTNER PRODUCT ORDER FORM 2016

5450 Second Avenue Pittsburgh, PA 15207 Phone: 412.322.5680 x7 Fax: 412.246.0705 bclemons@cribsforkids.org

Helping every baby sleep safer

Page 1of 2

BILLING ADDRESS: Please Print Legibly Company Name_ Address, City, State, Zip Code_ Contact Person_ Telephone #_ E-mail_		SHIPPING ADDRESS: Please Print Legibly Company Name Address, City, State, Zip Code			
		Contact Person Telephone # E-mail			
Date Issued	Requested Ship Date	Purchase Order#			
Shipping Inst	ructions			40.排12	
	not in stock, is a partial shipment with back order ok	1/5/2	ikely incura	additional shippi	ng charges.
Payment Met	hod				
Visa ☐ MC ☐ Address, City, S	☐ # Pay with Funds on File ☐ Pay Discover ☐ American Express ☐ Cardholder Nam tate and Zip Code as it appears on credit card state	neement		1941	
Card #	THE CONTRACTOR OF THE CONTRACT	Exp. Date			
ITEM#	ITEM DESCRIPTI	ON	QTY	UNIT COST	TOTAL
9H00FOF	Cribs for Kids⊛ Graco⊚ Pack 'n Play⊚	A PORT OF THE PROPERTY OF THE			
HSS07	Halo SleepSack with Cribs for Kids _® Logo	Sack with Cribs for Kids _® Logo			
PNPSHTFOF	Graco® Printed Generic Neutral Design (Various)	Printed Generic Neutral Design (Various) Sheet		5.00	5
RP07	Philips Soothie Pacifier	ile Pacifier		5.99	
PFM08	Safe Sleep Educational Materials with "ABC" Photo	Educational Materials with "ABC" Photo Frame Magnet (English)		4.99	
SPFM08	Safe Sleep Educational Materials with "ABC" Photo	Sleep Educational Materials with "ABC" Photo Frame Magnet (Spanish)		4.99	
SSSK07	English Safe Sleep Survival Kit (includes all the above, Eng	ish Safe Sleep Survival Kit (includes all the above, English magnet, DVD & safe sleep material)		115.99	
SPSSSK14	Spanish Safe Sleep Survival Kit (includes all the above, Sp.	anish magnet, DVD & safe sleep material)		115.99	-11
				Shipping	
Updated 1/2015	To provide documentation and avoid discrepancies, please complete this form and fax to 412.246.0705. For customer assistance, please call 412.322.5680, ext. 107 or email belemons@cribsforkids.org				
**Shipping Ir	structions and Shipping Charges				
If you need a sh	will be billed to customer's order. Order is shipped ipping quote please contact Cribs for Kidse (412)32 tyour shipping needs please answer questions	2-5680 x7 with zip code and ans	swers to th	e questions be	
Do you have a load	ing Dock? Y 🔲 N 🔲 If not, you will need a lift gate.				
Do you need inside	delivery? Y \(\sime\) \(\sime\) If so, do you have a door large enough	h for a 40"x48" pallet to go through? If n	iot, you may	need to ship Gro	und Service
	ne call before delivery? Y 🔲 N 🔲 (A \$30.00 charge may a				
If all product is not i	n stock, is a partial shipment with backorder ok? Y 🔲 N 🔲 I	Partial shipments will likely incur additio	nal shipping	charges.	
	Please sign second page to au	ıthorize shipping of this	order.		



NON-PARTNER PRODUCT ORDER FORM 2016

Page 2 of 2

5450 Second Avenue Pittsburgh, PA 15207 Phone: 412.322.5680 x7 Fax: 412.246.0705 bclemons@cribsforkids.org

	for accepting			H H	H 29 - 8 - F	Recorded to the second
	f	* * * * * * * * * * * * * * * * * * * *	REGERMAN OF STREET	FRANCISCO PARTIES	MARKET PART	ANNERSE
- III CIII CIC		**************************************	**************************************			
		W 1.75.2 8 1.73 5.75.2	MARKS STATE		M	THE R. P. LEWIS CO., LANSING MICH. LANSING P.

	If you:	Then:		
Shipping to Storage Facility	Need a phone call an hour before delivery to an unmanned facility.	You need to request a delivery appointment. If the trucker is out to deliver and he can not get in touch with you, you will incur a redelivery charge of up to \$800.00 depending on the size of your order.		
Refuse Delivery	Refuse a delivery for any reason.	You will incur a redelivery charge that you will be responsible for paying.		
Damages and Shortages	Sign your order as 'free damage or shortage' and then find out after the trucker leaves that you actually do have damage or shortage, you will most likely accept the loss.	Once you sign and accept your order as 'free of any damages or shortages' it is very hard for Cribs for Kids® to file a claim. Contact us the same day as the delivery and report the damages or shortages and / or any issues with the trucker or delivery.		
File a Claim	Have a damage or shortage from a delivery.	Call Barbara at (412) 322-5680 X7 to report the claim and fax bill of lading where you signed for the shortage or damage. A claim form will be e-mailed or faxed to you for completion.		
Request a Quote	Need to know the price of shipping cost before you place your order.	Call Barbara at (412) 322-5680 x7 and provide the following information: zip code of the ship to address; do you have a loading dock; do you need inside delivery; do you have a door entrance a pallet will fit through; do you need a phone call before delivery; and quantity of your order.		
Special Shipping Instructions	Need a shipment delivered any where except inside your door entrance or loading dock. EX: on second floor, in the basement, etc.	You need to notate this on the Product Order Form under "Special Shipping Instructions" and when requesting a quote. There are extra costs involved and /or you may need a different way of shipping to accommodate your needs.		
	Need shipment delivered by a specific time, need a call before delivery or any special circumstance for delivery needs.	You must notate under "Special Shipping Instructions" what your specific needs are.		
Special Shippi	ng Instructions:			
Order Authori	zed by: Print name	:		
Co	omplete email address to have invoice emailed, otherwise we	will mail invoice to the " bill to" address.		