

# Schuylkill Stories Order Form

Please print your name and mailing address:

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

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

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

Email address or telephone number: \_\_\_\_\_

Postage - 1 book (library rate): \$3. Add \$1 for each additional copy.

Please contact the library at (570) 622-8880 if you would prefer Priority Mail postage.



Copies of book \_\_\_ x \$20 each = \_\_\_\_\_

PA residents add 6% tax (\$1.20 ea): \_\_\_\_\_

Postage: \_\_\_\_\_

Total: \_\_\_\_\_

Send this order form and a check for the total amount, made payable to the Pottsville Free Public Library, to:

**Pottsville Free Public Library**  
**Attn: Schuylkill Stories**  
**215 W Market St**  
**Pottsville, PA 17901-4304**