

EVENFLO CAR SEAT ORDER SHEET

AUTHORITY: 1935 PA 59, as amended; **COMPLIANCE:** Voluntary, however, failure to complete order will result in denial of request.

| I. Requester's Information | | | | | |
|---|--|---|-------|---|----------------------|
| Requestor's Full Name | | County | | Desired Arrival Date | |
| II. Contact and Shipping Information | | | | | |
| Shipping Contact's Full Name | Shipping Street Address | City | State | ZIP Code | Contact Phone Number |
| III. Order Information | | | | | |
| Backless Booster (4 per box, minimum order of 4, priced per seat) | High-Back Booster (2 per box, minimum order of 2, priced per seat) | Combination Seat (2 per box, minimum order of 2, priced per seat) | | Convertible Seat (2 per box, minimum order of 2, priced per seat) | |
| Quantity (number of seats): Total Price: | Quantity (number of seats): Total Price: | Quantity (number of seats): Total Price: | | Quantity (number of seats): Total Price: | |

Submit Completed Form Using One of the Following Methods:

Alicia Sledge
Office of Highway Safety Planning
P.O. Box 30634
Lansing, MI 48909

FAX Number: 517-284-3338

Email Address:

sledgea@michigan.gov

Grand Total: _____

Please place your order based on the number of seats. Purchase orders **MUST** exceed **\$600.00**