

https://www.sa.org/store
 email: saico@sa.org

Sexaholics Anonymous
PO Box 3565, Brentwood TN 37027

Office: 615 370 6062
 Toll free: 866 424 8777

Item Description	Weight	Qty	Price/EA	Amount
First Find Your Dr. Bob ***NEW***	0.07 lb		\$0.75	
SA is for Women ***NEW***	0.06 lb		\$0.75	
So, You're Going to Prison ***NEW***	0.09 lb		\$1.00	
90 Days of Meditations	0.43 lb		\$6.00	
Do You Have a Problem with Pornography or Lust on the Internet?	0.04 lb		\$1.00	
Is SA for Me? Am I Too Young to be a Sexaholic?	0.04 lb		\$0.20	
Member Stories 2007	0.63 lb		\$10.00	
Practical Guidelines for Group Recovery	0.04 lb		\$1.00	
Practical Recovery Tools 1994-2003	0.44 lb		\$8.00	
SA Correctional Facilities Committee	0.03 lb		\$0.26	
SA to the Newcomer	0.03 lb		\$0.20	
SA Pocket Toolkit	0.04 lb		\$1.00	
SA as a Resource for the Health & Helping Professional	0.03 lb		\$0.20	
SA Service Manual	1.00 lb		\$5.00	
SA Sponsorship	0.04 lb		\$1.00	
Step Into Action	0.94 lb		\$10.00	
The SA Home Group	0.04 lb		\$0.50	
The Spirituality of Service	0.07 lb		\$0.50	
Why Stop Lusting?	0.03 lb		\$0.20	
Subtotal for items Above. May deduct 20% if order totals \$200 - \$499.00 USD; 30% for order \$500 USD or more.			Total	
		Sales tax	Order	.09, TN, .0975
Discounts do not apply to Essay newsletter subscriptions		Type	(FL, .07; CA,	Price/EA
Essay Newsletter		Single	Quantity	\$16.00
Print version mailed to address in USA		Single		\$20.00
Print version Mailed to address outside USA		Group		\$14.00
Group - 10 or more mailed to the same USA address				Amount
DONATION ___ Individual or Group name _____		Expires		Total USD
Payments accepted in U.S. funds only by Check, PayPal, Money Order, MasterCard, Discover, or Visa				
			CVS	
Card _____ # _____			_____	
Ship Fastest Way _____ or cheapest way _____		Shipping	& Handling	
Shipping and handling rates are figured on the basis of weight & labor to prepare plus \$1.87 per package.		SAICO		
For rate quotes, call SAICO.		<i>Notes:</i>		
NAME: _____				
Address: _____				
Address: _____				
City: _____				
Province / State _____				
Country: _____				
Postal Code: _____				
DATE: _____				
Phone: _____				
		Form		
		Order		6/1/2017