



Request for Collateral Materials

Date: _____

Regular Mail Urgent Mail

Agency Name _____

Contact Name _____

Agency Address _____

Phone # () _____ Fax # () _____

Website _____ Email _____

Intended Use of Materials _____

Please indicate quantity for each requested item:

Brochures*	(5) <input type="checkbox"/>	(25) <input type="checkbox"/>	(50) <input type="checkbox"/>	(100) <input type="checkbox"/>	Other _____
Client Cards	(5) <input type="checkbox"/>	(25) <input type="checkbox"/>	(50) <input type="checkbox"/>	(100) <input type="checkbox"/>	Other _____
Pens	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____
Bookmarks**	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____
Emery Boards**	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____
Posters – General	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____
Verbal Abuse Awareness Campaign:					
Posters	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____
TV Ad DVD (\$10 per copy)***	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____
Survivors Guide to Freedom from Violence DVD (\$10 per copy)***	(1) <input type="checkbox"/>	(5) <input type="checkbox"/>	(10) <input type="checkbox"/>	(25) <input type="checkbox"/>	Other _____

*** Available in 15 languages, including: Amharic, Arabic, Cree, Farsi, Hungarian, Ojibway, Portuguese, Punjabi, Russian, Simplified Chinese, Somali, Spanish, Tamil, Traditional Chinese, Vietnamese**

** These items are not intended for mass distribution. Please only request if they will be distributed directly to women who need discreet access to info about our crisis line number

*** Please make cheque payable to: *Assaulted Women's Helpline*

Additional Information: _____

Please complete and fax to the TRO Department at 416-364-0563
Or mail to: AWHL – TRO Department
P.O. Box 369, Station B
Toronto, ON M5T 2W2