



INVOICE

CERTIFIED NURSING ASSISTANTS COMPACT DISC

Maryland Board of Nursing
4140 Patterson Avenue
Baltimore, MD 21215-2254

SOLD TO: (complete for prompt service)

Name:
Organization:
Address:

Phone:

| DESCRIPTION | PRICE | QTY | SUBTOTAL |
|--|-----------|-----|----------|
| All active Certified Nursing Assistants residing in Maryland. <i>(Does not include additional certifications. Contains only names and addresses)</i> | \$250.00 | | |
| All active Certified Nursing Assistants with GNA, CMA, and HHA certifications. <i>(Contains only names, addresses and certification)</i> | \$350.00 | | |
| If you only want specific certifications, CHECK all that apply | | | |
| ___ Geriatric Nursing Assistants | \$350.00 | | |
| ___ Certified Medicine Aides | \$350.00 | | |
| ___ Home Health Aides | \$350.00 | | |
| Receive data via e-mail <i>(No compact disc will be shipped to you!) - subtract \$50.00</i> Enter e-mail address: | <\$50.00> | X | |
| TOTAL | | | |

- Please print and mail your request to:
Maryland Board of Nursing
ATTN: Administrative Services
4140 Patterson Avenue
Baltimore, Maryland 21215
- Make check or money order payable to Maryland Board of Nursing. Check or money order MUST be attached for Order to be processed!
- All data is in tab-delimited ASCII text format and placed on CD. Microsoft Excel format is NOT available.
- Please anticipate processing will take 2 - 4 weeks upon receipt.
- Status questions concerning your order may be sent to MDBON.Fiscal@maryland.gov

THANK YOU FOR YOUR BUSINESS!