



Local
Government
CENTER



Date: _____

**LOCAL GOVERNMENT CENTER
ORDER FORM**

Name: _____ County: _____

Municipality / Organization: _____

Billing Address: _____

Shipping Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Please note: If you plan on paying with credit card call our office.
We do not accept credit card information via mail, fax or email for security measures.

Description	Quantity	Price	Total
2017-2018 Wisconsin Statutes-Chapter 60-Towns		\$ 30.00	\$
(Updated April 2019)		\$	\$
Subtotal			\$
Other Charges or Credits			
Total Amount Due			\$

Method of Payment: ☐ Check ☐ VISA ☐ MasterCard ☐ American Express

☐ Discover ☐ Bill / Invoice

Make *check* payable to **UW-Extension** and send with this form to:
Local Government Center, 702 Langdon Street, Suite 111 Pyle Center, Madison, WI 53708

Credit card payment: Call **608-262-9961** between: 8:00 am to 4:00 pm Monday through Friday.
If we do not answer, please leave a message and we will promptly return your call.

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