

BOOK OF THE MONTH

Redemption Directions:

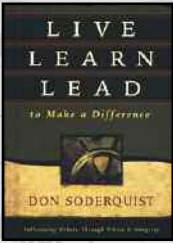
1. Complete the certificate below.
 2. Include payment for IAHBE processing fee in US dollars. US residents must include \$4. Residents of Canada and Mexico must include \$5. Residents of all other countries must include \$8.00.
 3. Mail to: IAHBE, Redemption Dept., 5945 Cornhusker Hwy, Ste A, Lincoln, NE 68507 USA
- Please allow up to 6 weeks (8-10 weeks for international affiliates) for your book to arrive.
 - This special offer expires 05/31/10.
 - Only one discount certificate, coupon, or other special promotion may be used with this product.

MAGAZINE OF THE MONTH

Redemption Directions:

1. Complete the certificate below.
 2. Include payment for IAHBE processing fee in US dollars. US residents must include \$3. Sorry, this magazine is not available outside the US.
 3. Mail to: IAHBE, Redemption Dept., 5945 Cornhusker Hwy, Ste A, Lincoln, NE 68507 USA
- Please allow up to 12 weeks for your first issue to arrive.
 - This special offer expires 05/31/10.
 - Only one discount certificate, coupon, or other special promotion may be used with this product.

This Certificate Is Redeemable For



March 2010
Book-Of-The-Month

Value \$14.99

See other side for complete redemption directions

Expires 05/31/10 45-B03 2010 KK 0010

This Certificate Is Redeemable For



March 2010
Magazine-Of-The-Month

Value \$49.90

See other side for complete redemption directions

Expires 05/31/10 45-S03 2010 KK 0010

March 2010 MOTM - Inc.

45-S03 2010 KK 0010 **S113**

Yes, I wish to redeem this IAHBE magazine certificate. I am enclosing appropriate payment of \$ _____ as specified above.

March 2010 BOTM - Live Learn Lead to Make a Difference

45-B03 2010 KK 0010 **B296**

Yes, I wish to redeem this IAHBE book certificate. I am enclosing appropriate payment of \$ _____ as specified above.

Total enclosed: \$ _____





Expires 05/31/10

IAHBE Member # _____

Name: _____


Address: _____ City: _____ State: _____ ZIP: _____

Payment via:

Cash/Check/Money Order Credit Card:    

Credit Card # _____

Exp (Mo/Yr): _____ Cardholder's Name: _____

 *Note: If your ship-to address is changing or if the address in your IAHBE account is incorrect, please attach a separate sheet of paper with the proper address information.*