

Grocery Coupan Request Form

To Receive your \$1,000 Grocery Coupon Booklet, return this completed form with \$5.95 (S & H) payable to Controlled Programs and mail to:

**NCSE
Attn: Grocery Coupons
P.O. Box 410
Ponte Vedra, FL 32004-0410**

Please allow 3-4 weeks for delivery of your coupon booklet

Member ID Number: _____

Name: _____

Address: _____

City: _____ **St** _____ **Zip** _____

Daytime Phone: _____