

**Department of Health Distribution Center Fax Form**Billing Code: TCP – 0907001 3049 736 CS E

**CVD013** – BCBH Chronic Disease Rack Card *(green)*

Quantity: #

**CVD035** – BCBH Diabetes Rack Card *(blue)*

Quantity: #

**CVD038** – BCBH Chronic Pain Rack Card *(pink)*

Quantity: #

**CVD039** – BCBH Worksite Rack Card *(orange)*

Quantity: #

**CVD036** – BCBH Program Flyer

Quantity: #

 **CVD018** – BCBH Rx Pad *(each pad has 50 sheets)*

Quantity: # Pads

 **CVD003** – BCBH Workshop Posters *(set of 4 different posters)*

Quantity: # Sets

**Fax order form to: (primary order option)**

Department of Health Distribution Center  
Attn: Taylor Carlson  
Fax: 605-347-9631

**Mail completed orders to: (No PO Box numbers)**

Click here to enter text.

**IF UNABLE TO FAX:** email completed form to [Alicyn.Even@state.sd.us](mailto:Alicyn.Even@state.sd.us) for assistance