

2019 Iowa Employer Benefits Study®

ORDER FORM

Please determine the quantity of studies you would like to purchase and complete the following information. The contact information you provide is strictly confidential and will only be used to fulfill your order. * Required



*Organization Name:	
*Purchaser's Name:	
*Mailing Address:	
*City, State, Zip:	
*Email:	
*Phone:	

2019 Iowa Employer Benefits Study®		
	Quantity	Price - \$300 each
Overall Summary		
TOTAL DUE:		

All Study Orders are processed immediately upon receipt of full payment.

Please make check payable to:
David P. Lind Benchmark

Mail this Order Form and Check to:
David P. Lind Benchmark
13375 University Avenue, Suite 202
Clive, IA 50325

