

IFLOSS Coalition: Communities Working Together to Improve Oral Health in Illinois

Toothbrush Consortium Order Form

Agency Name: _____

Shipping Address: _____

Billing Address: (if different from shipping) _____

Phone: _____ Fax: _____ E-Mail: _____

Toothbrushes (brushes are from Tess & Smilemakers)

Preschool Signature Brushes \$0.30 per brush
\$43.20 per gross X _____ gross = \$ _____

Junior Signature Toothbrushes \$0.30 per brush
\$43.20 per gross X _____ gross = \$ _____

Junior Super Grip Toothbrushes \$0.24 per brush
\$34.36 per gross X _____ gross = \$ _____



Pre-Adult size Toothbrushes \$0.30 per brush
\$43.44 per gross X _____ gross = _____
recommended for ages 9-12



Adult Signature Toothbrushes \$0.38 per brush
\$54.72 per gross X _____ gross = \$ _____

Adult Soft Toothbrush \$0.33 per brush
\$47.58 per gross X _____ gross = \$ _____



Infant-Toddler Safety Brush 24 brushes in each box
\$38.60 per box X # _____ boxes = \$ _____
(tear drop shaped handle)

Floss

Waxed Floss 10 meter containers \$0.30 each
\$30 per box of 100 \$ _____

Toothpaste

Crest toothpaste-1 case is 72 sample size containers
\$25.00 per case

Crest Whitening w/scope _____ case(s) \$ _____
Crest Regular paste _____ case(s) \$ _____
Crest Sparkle (kids) _____ case(s) \$ _____

Non Member Processing Fee: \$20.00

OR

IFLOSS Dues paying Member Processing Fee: \$10.00

Total Fee Payable to: IFLOSS Coalition \$ _____

Contact person: _____

Please send order to
IFLOSS Coalition
2833 South Grand Ave East
Springfield, IL 62703
Lisa@ifloss.org

or Fax to 217-789-2203