

**ORDER FORM FOR PURCHASE OF OKLAHOMA BEDDING STAMPS**

Name of Facility: \_\_\_\_\_

Physical Address of Facility: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Universal Registry Number (URN): \_\_\_\_\_

Number of Stamps Needed (5 cents each): \_\_\_\_\_

Amount of payment enclosed: \_\_\_\_\_

***\*BEDDING STAMPS CAN ONLY BE ORDERED IN QUANTITIES OF 100\****

Please complete this order form and mail it in along with the appropriate payment. Payments should be made out to the Oklahoma State Department of Health and mailed to the following address:

*Oklahoma State Department of Health  
Consumer Protection Division  
PO Box 268815  
Oklahoma City, OK 73126*

If you have any questions please contact Corey Colen at [coreyc@health.ok.gov](mailto:coreyc@health.ok.gov) or at 405-271-5243.