



# Sample Order Form

date ordered:		
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### BILL TO:

Organization		
Contact Person		
Address		
City	State	Zip
daytime phone		
email:		

### SHIP TO:

Organization		
Contact Person		
Address		
City	State	Zip
evening phone		

### Shipping

residence: \_\_\_\_\_ non-residence: \_\_\_\_\_

UPS Ground (7% of order, \$15 minimum)	
UPS 3 day (8% of order, \$20 minimum)	
UPS 2 day (9% of order, \$25 minimum)	
Next day (13% of order, \$40 minimum)	

<input type="checkbox"/>	prepayment in full, we accept all major CCs
<input type="checkbox"/>	50% deposit - balance due prior to shipping
<input type="checkbox"/>	purchase order for full order, 50% deposit require

Check which method of payment you prefer.

### Payment

credit card number		
expiration date	security code	
name (as it appears on card)		
card holders billing address		
city	state	zip

### ORDER

qty	style no.	fabric (if custom)	color	size	description	price ea.	total

signature:
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subtotal	
shipping	\$ 15.00
total	
tax (7% if in Iowa)	
deposit	
balance	

By signing this form I verify that the order is complete and accurate and that I agree to Dornink policies.