



Sample Order Form

date ordered:		
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BILL TO:

School/Organization		
Contact Person		
Address		
City	State	Zip
daytime phone		
email:		

SHIP TO:

School/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:

subtotal	
shipping	\$ 15.00
total	
deposit	
balance	

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