CriDoG GREETING CARDS

CUSTOMER ORDER FORM

CUSTOMER # _____ ORDER # _____ INVOICE # _____
(FOR OFFICE USE ONLY)

Please fax to CriDoG GREETING CARDS: **718.767.1489**

BILL TO: _____

PHONE: _____

FAX: _____

SHIP TO: _____

PHONE: _____

FAX: _____

DATE: ___/___/___

SHIP: ___/___/___

PAYMENT OPTIONS: ☐ Check ☐ CREDIT CARD (CIRCLE ONE): VISA MC

CARD #: _____ **EXP DATE:** _____

NAME ON CARD: _____ **CREDIT CARD BILLING ADDRESS:** _____

Resale Number: _____

QTY.	ITEM (code)	QTY.	ITEM (code)	QTY.	ITEM (code)	QTY.	ITEM (code)

Buyer's Name: Buyer's Signature: