



2800 Gholson Rd. P.O. Box 2660
 Waco, TX 76702-2660
 Customer Service 800-448-2839 Fax 800-521-8576

FOR FAX ORDERS:
 PAGE ____ OF ____

ACCESSORY ORDER BLANK

DO NOT WRITE IN THE SPACE ABOVE

ORDER CHECKLIST

Please use this checklist to assist you in avoiding common omissions and errors.

I have checked my order form to ensure that each item has the following:

- Item Number
- Ink (or Foil) Color
- Quantity
- Font Selection (If Applicable)
- Design (If Applicable)
- Clearly Printed or Typed Wording

Proofs Should Be Sent

Supply information for store, not the customer

By Email _____
 -Or-
 By Fax _____

SPECIAL INSTRUCTIONS

Please indicate which instructions go with each part

DROP SHIPMENT (BOX MUST BE MARKED)

EXTRA CHARGES WILL APPLY

Specify Address Below

Name: _____

Company: _____

Address: _____

City: _____

State, Zip: _____

ALL ORDERS WILL BE SHIPPED BY
 UPS OR FEDEX GROUND
 UNLESS OTHERWISE SPECIFIED BELOW

- UPS NEXT DAY AIR
- UPS 2ND DAY AIR
- UPS 3RD DAY SELECT
- FEDEX OVERNIGHT
- FEDEX 2ND DAY AIR

ADDITIONAL SHIPPING CHARGES WILL APPLY

	Account #
	P.O. #
	Date Ordered

THANK YOU / INFORMAL NOTE

Quantity	Item Number	Lettering	Ink Color	Verse	<input type="checkbox"/> Proof Requested
1					
2					
3					
4					
5					

NAPKINS

Quantity	Item Number	Layout (Extra charge will apply)	Lettering (Extra charge will apply)	Imprint Color	<input type="checkbox"/> Ink <input type="checkbox"/> Foil	Design Number	<input type="checkbox"/> Proof Requested
1							
2							
3							

MATCHES / NOTEPADS

Quantity	Item Number	Lettering (Extra charge will apply)	Foil Color	Design Number	<input type="checkbox"/> Proof Requested
1					
2					
3					

KNIFE AND SERVER SETS

Quantity	Item Number
1	
2	

FLUTES

Quantity	Item Number
1	
2	

ADDITIONAL ITEMS

Quantity	Item Number	Layout	Lettering (Extra charge will apply)	Imprint Color	<input type="checkbox"/> Ink <input type="checkbox"/> Foil	Design Number	<input type="checkbox"/> Proof Requested
1							
2							
3							