

STAMP ORDER FORM

Complete this form and fax to 850-934-8022
(Plastic Engraving Accounts will be billed)

Customer Information

Date: / /

Name _____

Company Name _____

Address _____

Tel _____ Fax _____

E-mail _____

Credit Card # _____ Exp _____

V Code (last 3 digits on reverse side of card) _____

Customer Stamp Data

Size _____ Style _____ Ink Color _____

Customer Stamp Data by line

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Remarks

Size #1438: \$19.95
Size #1850: \$23.95
Size #2260: \$26.95
Size #2770: \$29.95

Qty. _____ x Price _____

FL sales tax 6.5% _____

S&H (USPS) \$4.95

Total _____

(local pick up, do not add shipping)



We Accept Visa and Mastercard

Code #