

ORDER



TOLL FREE 866-275-1450
Fax 903-236-3654

BOXTOPIA
2401 Judson Rd.
#101 & 104
Longview, TX 75605, USA

Date _____ Your P.O.# _____ E-mail _____

Sold to: Co. Name _____
 Address _____

 City _____ St. _____ Zip _____
 Contact _____
 Phone () _____ Fax () _____

Ship to: Co. Name _____
 Address _____

 City _____ St. _____ Zip _____
 Attn: _____

Date Required _____ Ship Via _____ FOB _____ Tax ID (if applicable) _____

Price Quotation # _____
Product Description _____

Product Proof # _____ Item # _____
Imprint Instructions _____

Quantity Ordered _____	Price Per Each _____	Total _____
		Art Charges _____
		Plate Charges _____
		Other Charges _____
		Sub-Total (prior to shipping) _____
		Freight _____
		Tax _____
		TOTAL DUE _____

TRANSACTION and AUTHORIZATION INFORMATION

Your credit card will be charged when your order is shipped.

Credit Card # _____ Expiration date _____

Card Type: Visa MasterCard

I authorize BOXTOPIA (a wholly owned property and division of BNewton Associates) to charge the above referenced credit card.

Company name as it appears on card (please print) _____

Your name as it appears on card (please print) _____

Billing address for card (please print) _____

City _____ State _____ Zip _____

Authorized signature _____ Today's date _____