

MAIL/FAX ORDER FORM

Tel: 810-724-0636 Fax: 810-724-2015

BILLING INFORMATION		SHIPPING INFORMATION 0		Check if same as Billing Info
Company City Phone Fax:	State Zip	Company City Phone Fax:	State	Zip
PURCHASE ORDER IN	IFO	DATE ORDERED		
Purchase Order No		Date		
SKU NUMBER	PRODUCT NAME	QТY	UNIT PRI	CE TOTAL PRICE
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			_	
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For the most up-to-da	ate shipping costs, see our website at <u>ht</u>	Shi Gra	pping Costs: and Total:	:hipping-information.
PAYMENT METHOD		FAX OR MAIL IN YOUR ORDER		
Visa Mastercard Discover Check/Money Order		FAX ORDER TO: MAIL ORDER TO:	810-724-2015 Grapentin Specialties	
Credit Card #			5599 Bowers Ro Imlay City, MI	
Full Name on Card		OUTCT: ONG 333		
Card Expiration Date		QUESTIONS ???	Call us at 810-7	24-0636
CCV (3-Digit Security Code	e)			