Giftpreneurs

CUSTOMER ORDER FORM

640 S. Grand Ave. • Suite #106 • Santa Ana, CA 92705-4156
Phone 714.542.1696 • Fax 714.542.1896

For Questions when ordering call:
1(800)500-5574

ORDER DATE _____

BILL TO

Ordered By: _____
Title: _____
Organization: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone Number: _____
Fax Number: _____
Customer P.O.#: _____

Method of Payment:

☐ Net 30 Days (O.A.C.), ☐ Due On Receipt
☐ VISA, ☐ MasterCard
Credit Card #: _____
Expiration Date: _____
Cardholder Signature: _____

SHIP TO

Ordered By: _____
Title: _____
Organization: _____
Address: _____
City: _____
State: _____ Zip: _____
Phone Number: _____
Fax Number: _____
Your Signature: _____

Shipping Instructions: Check One

☐ Penalty Label (Label 41)
☐ Ship Priority - Bill Me
☐ Ship Express Mail
Acct.# _____
☐ Ship Parcel Post - Bill Me

Product #	Size	Description	Quantity	Unit Price	Total Price

Please enclose additional sheets or make copies of this form if more space is needed. Please allow 2-4 weeks delivery for items temporarily out of stock. Some items may be subject to availability. **Prices are subject to change without notice. (Minimum Order $50.00)**

TOTAL $