



PRODUCT ORDER FORM

Item	Quantity	Cost per unit (case)	Total



Fundraising Program  
www.21CHO1.com

**Shipping & Handling**

30 Units per case      \$105.00  
Shipping per case      \$ 6.95

Subtotal \_\_\_\_\_  
Shipping & Handling \_\_\_\_\_  
Grand Total USD \_\_\_\_\_

All orders shipped via ground  
(7-10 day delivery)

Dr. Mr. Mrs. Ms. Miss \_\_\_\_\_  
(please circle one)      First Name      MI      Last Name

Title \_\_\_\_\_ Organization Name \_\_\_\_\_

Mailing Address       Home       Business

Billing Address \_\_\_\_\_ Shipping Address (no P.O. boxes) \_\_\_\_\_

City      State      ZIP      City      State      ZIP

Country      Postal Code      Country      Postal Code

Daytime Phone Number\*      Fax Number\*      \*E-Mail

\*For international numbers, please include country and city codes.

\*Required for shipping purposes.

Method of Payment (U.S. Funds Only)      Prices are subject to change.

Personal Check \$ \_\_\_\_\_       Organization Check \$ \_\_\_\_\_ Organization Name \_\_\_\_\_

Credit/Procurement Card      \_\_\_ VISA      \_\_\_ MasterCard      \_\_\_ American Express      \_\_\_ Diners Club

Card # \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_

Cardholder Signature \_\_\_\_\_

21CHO1 Use Only

Please fill out form completely. Thank You!

\$ Amount \_\_\_\_\_ Approval # \_\_\_\_\_