

# TOKENS & ICONS

...recycled nostalgia

## RETAIL ORDER FORM

Date: \_\_\_\_\_

Name:	_____		
Street:	_____	Unit:	_____
City:	_____	State:	_____ Zip: _____
Phone:	_____		
Email (for UPS tracking info):	_____		

Style #	Description	Qty	Price	Total
Total				

Credit Card #: _____ We will charge your credit card when your order ships. We will only use your credit card information for the fulfillment of your order.
Exp. Date: ____ / ____ CVVS #: _____
Signature: _____
Billing Address (if different): Street #: _____ Zip Code: _____

Shipping:
<input type="checkbox"/> UPS Ground \$8.00
<input type="checkbox"/> UPS 3 Day \$14.00
<input type="checkbox"/> UPS 2 Day \$20.00
Arrive Date: _____

Special Instructions:
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FAX TO 510-704-7499