

Swatch Order Form



ORDER DATE: _____ WEAR DATE: _____

CUSTOMER SHIPPING INFORMATION

_____			_____		
Customer Name			Email		
_____			_____		
Shipping Street Address/Apt	City	State	Zip		
_____			_____		
Day Phone			Evening Phone		
_____			_____		

		<u>QUANTITY</u>
Fabric: _____	Color: _____	_____
Fabric: _____	Color: _____	_____
Fabric: _____	Color: _____	_____
Fabric: _____	Color: _____	_____
Fabric: _____	Color: _____	_____
Fabric: _____	Color: _____	_____
Total Quantity		_____
\$3.00 per Swatch		x \$3.00
Subtotal		\$ _____
9.5% Tax for California Delivery and Pick-up		\$ _____
Additional Shipping Options (No Charge for US Postal Service)		
UPS Overnight Shipping in USA: \$35.00		\$ _____
UPS 2-Day Air Shipping in USA: \$25.00		\$ _____
\$5 Signature Request (optional)		\$ _____
Total		\$ _____

CUSTOMER BILLING INFORMATION

_____			_____		
Billing Street Address/Apt	City	State	Zip		
CHECK ___ VISA ___ MC ___			_____ / _____		
Credit Card Number		CVV2 Code (last 3 digits on back of card)	Expiration Date (Month/Year)		

I hereby authorize Beverley E. Siri, Inc. to charge my credit card for the total amount of the above order or I enclose a check payable to Siri. I understand that a \$20 fee will be incurred for any returned check.

_____	_____
Customer/Cardholder Signature	Date

SCAN/EMAIL or FAX or MAIL with Order Agreement