

PRINT THIS PAGE



BILLING INFORMATION *same as credit card*

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____
Email _____

SHIP TO INFORMATION *if different than above*

Name _____
Address _____
City _____ State _____ Zip _____

ORDER INFORMATION

Item #	Shape	Description	Quantity	Price Ea.	Total

SHIPPING OPTIONS *all orders are prepaid - no COD's*

Subtotal	
International Orders add 10% of subtotal	
Rush Orders add 10% of subtotal (\$15 minimum)	
Regular Shipping & Handling add \$6.50	
Express Mail add \$10.00	
TOTAL ENCLOSED \$	

PAYMENT INFORMATION *check one*

<input type="checkbox"/> Visa	<input type="text"/> Card #
<input type="checkbox"/> Mastercard	<input type="text"/> Exp. Date
<input type="checkbox"/> Discover	
<input type="checkbox"/> Check Enclosed	
<input type="checkbox"/> School P.O. Enclosed	

Signature _____ **Date** _____

Phone the Order to Arundo - Phone 503.647.0958
Fax the Order to Arundo - Fax 503.647.5498
Email the Order to Arundo - arundo@earthlink.net