

Mail-In Manual Order Form

Item(s) Ordering (model number required): _____

_____ (print cart if possible)

Sub Amount (\$USD): _____
Shipping (\$USD): _____ USPS UPS
Tax (Indiana only): _____

GRAND Total: _____

Payment Method (check one):

Money Order: (USPS Postal Money Order ONLY)

Card Type: Visa MasterCard Discover American Express

Card Number: _____

Expiration Date: _____ (MM/YYYY) CSC: _____ (on back right)

Billing Information:

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Email: _____

Shipping Information: (same as billing (circle one)? Yes or no

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____

Zip: _____