Visit our website at: www.scrollsawgifts.com

					_			
Name: Date:					Paid By: Cash / Check / Credit Card CC#:			
Address:				_				
City:	y: State: Zip:			_	Exp: CUU			
Phone: Email:					Checks payable to: Scroll Saw Gifts			
Contact Name:					Full payment is due with order.			
Item # Qty Descr			cripti	on	Each Total			
						Total (A)		
Personalized Items:						F I-	Total (D)	
Item #	Qty Descript			on		Each	Total (B)	
Names or lettering:				Year or date (if applicable):				
Orientation (if applicable):				# of photo openings (if applicable):				
Item # Qty De			cripti	cription Each			Total (C)	
	<u> </u>						10.01(0)	
Names or lettering:				Year or date (if applicable):				
Orientation (if applicable):				# of photo openings (if applicable):				
Ship to address: (if different from above)				Total (A) + (B) + (C) \$				
Name:				Shipping – 10% of total, \$5 minimum \$			\$	
Address:				s	Subtotal \$			
City:				s	Sales Tax (MI Residents Only Add 6%) \$			
State:Zip:				1	Total Due \$			
Orders ship either USPS or FedEx. Orders ship within 7-10 business days. All sales final. Damaged product returned for replacement. Phone orders welcome – (231) 893-7276 Authorized Signature								
r none orders v	veicoiiie –	43 J 073-1410		Authorized Signature				