



# Order Form

**BILL TO:** (Same as Credit Card)

Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**SHIP TO:** (if different from BILL TO)

Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

COLOR	QTY	AMOUNT
YELLOW		\$5.00 ea.
TEAL		\$5.00 ea.
WHITE		\$5.00 ea.
BLUE		\$5.00 ea.
ORANGE		\$5.00 ea.
RED		\$5.00 ea.
BLACK		\$5.00 ea.

SHIPPING:  
 Qty: 1-2 = \$5.00 3-4 = \$6.00  
 4-8 = \$7.00 9-15 = \$12.00  
 Depending on quantity additional shipping  
 may need to be charged.

**SUB TOTAL:**  
**OH RES SALES TAX:**  
**SHIPPING:**  
**TOTAL:**


**Payment Information:**

Name on Card \_\_\_\_\_  
 Signature: \_\_\_\_\_

Visa MasterCard American Express  
 Credit Card#: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_  
 CSC#: **3 or 4 Digit Security Code:** \_\_\_\_\_

**Fax to: 937-335-5758**

**Mail To: Kickstand Plates  
 1554 McKaig Ave. Bldg B  
 Troy, OH 45373**