

EASELMOMENTS

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Website: www.easelmoments.com E-mail: info@easelmoments.com

PURCHASE ORDER / INVOICE #: _____

CHECK IF BILL ADDRESS IS SAME

SHIP TO: _____
NAME OF BUSINESS/INDIVIDUAL

BILL TO: _____
NAME OF BUSINESS/INDIVIDUAL

STREET ADDRESS _____

STREET ADDRESS _____

CITY STATE ZIP _____

CITY STATE ZIP _____

TEL # CONTACT PERSON _____

TEL # A/P CONTACT PERSON _____

EMAIL ADDRESS _____

EMAIL ADDRESS _____

METHOD OF PAYMENT: CHECK CREDIT CARD PAYPAL NET 30
(NET 30 REQUIRES CREDIT APP. ON FILE. CUSTOM ORDERS ARE INITIATED ONLY AFTER RECEIPT OF ADVANCE)

CHARGE TO: VISA MC AMERICAN EXPRESS DISCOVER

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____ **NAME ON CARD:** _____

BILLING ADD OF THE CARD: _____

3-DIG CODE ON BACK OF VISA/MC/DIS CARD: _____ **4-DIG CODE ON FRONT FOR AMEX:** _____

SHIPPING: UPS GRD UPS 3-DAY UPS 2-DAY UPS 2-DAY USMAIL FEDEX

ORDER DETAILS: DO NOT FILL IF INVOICE/PURCHASE # PROVIDED ABOVE									
ITEM #	UNITS/CASES	COST EACH	CASE COST	TOTAL	ITEM #	UNITS/CASES	COST EACH	CASE COST	TOTAL

AUTHORIZATION: I, _____, AUTHORIZE EASEL MOMENTS TO CHARGE MY CREDIT CARD MENTIONED ABOVE FOR THE ORDER TOTALING \$ _____ CONFIRMED HEREIN ALONG WITH ADDITIONAL FREIGHT COSTS OF \$ _____, SALES TAX (IF APPLICABLE) \$ _____, GRAND TOTAL: \$ _____.

BUYER NAME _____

BUYER SIGNATURE (TYPE AGAIN) _____

DATE _____

FAX TO 714-482-6776

(A portion of our sales proceeds helps educate children grades K-12 in our fight against poverty)