DMI Fundraising.com

ORDER FORM

Fax order form and form ST-105 to (219) 465-1356

QUANTITY	ITEM/DESCRIPTION	PRICE	SUBTOTAL
		Order Total:	
		Tax:	
		Shipping:	
		Total:	

Requested Delivery Date:

PURCHASER		
Organization Name:	**Organization Representative:**	
Registered Organization Address:		
City:	**State:**	**Zip:**
Phone:	**Fax:**	**Email:**
Bookkeepers Name:	**Bkkpr Phone:**	**Bkkpr Email:**

SHIPPING INFORMATION		
Person to Receive Shipment:	**C/O:**	
Address (no PO Boxes):		
City:	**State:**	**Zip:**
Phone:	**Fax:**	**Email:**
County:	**Shipping location is: [ ] School [ ] Business [ ] Residence**	

METHOD OF PAYMENT

Pre-pay
[ ] VISA
[ ] MASTERCARD
[ ] DISCOVER
[ ] CHECK, NUMBER: _____

For Net 20 day credit terms:
[ ] SEND BILL, SUBMIT ORDER FORM WITH A SCHOOL PURCHASE ORDER
[ ] SEND BILL, SUBMIT ORDER FORM WITH A CREDIT APPLICATION

Credit Card Number:		**Expiration Date:**
Name as Shown on Card:		**3-Digit CVC:**
Billing Address for Card:	**City, ST:**	**Zip:**
Signature:		

For Payments by Check

Routing Number (first 9-digits)	**Account Number:**
Name of Account:	**Name of Bank:**

For Office Use	Source:	Rep:

Rev 8.08

To complete your order fax this form and required form ST-105 to 219-465-1356
Thank you for your order

319 E 316 N Suite F
Valparaiso IN 46383
(800) 628-5905
(219) 464-9956
(219) 465-1356 (fax)

AFRDS