



PO Box 237 PeaceDale, RI 02883

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Order Form

Name: _____

Address: _____

City: _____

Zip Code: _____

Phone: _____

Email Address: _____

Item Name	Width	Size	Pattern Choice	Price	Quantity	Subtotal

Subtotal of items: _____

Sales Tax (7%) Please multiply the subtotal of items by 0.07.

Subtotal of items + sales tax: _____

Shipping & Handling:

Please add the following shipping and handling fees to your order.

From	To	Add shipping amount shown below:
0.01	9.99	\$3.95
10.00	24.99	\$4.95

25.00	54.99	\$5.95
55.00	74.99	\$6.95
75.00	& up	\$7.95

Subtotal of items + sales tax + shipping & handing:

Total Cost: _____

Payment Type:

Please check one.

Check _____ Money Order _____ Credit Card/Debit Card _____

Credit Card Information:

(Please circle one.)

Visa MasterCard AmXpress Discover

Card Number _____

Expiration _____

Credit card source code (last 3 digits on back of card) _____

Name as it appear on credit card: _____

Billing address of credit card: _____