Gift Card Reorder Form FAX THIS FORM TO:

FAX THIS FORM TO: FOR ASSISTANCE CALL: (718) 971-5455

ISO # 8146 S	ALES AGENT:_						
		Μ	ERCHANT INF	ORMATIC	DN .		
Date:							
Merchant Name:							
Ship to:							
Address:							
Contact Name:							
Phone Number <u>:</u>							
		CAR	D RE-ORDER I				
Cost per Card \$			Card		YOUR LOGO HERE	YOUR LOGO HERE	YOUR LOGO HERE
□ Same as my e	existing cards			UR LOGO HERE			
□ New Card Des	sign (Please ch	eck new card	d design) 📃	Aqua	GIFT CARD Pizzeria	Botanic	Universal
\$75.00 Plate fee if	new card desigi	n is selected					×
	-		YOUR LOG	O MERE	YOUR LOGO HERE	YOUR LOGO HERE	YOUR LOGO HERE
QUANTITY:			Gife Cours	Present	Gift Card	GIFT CARD	• Gift Card •
□ 100 □ 200 □	□ 500 □ 1000	□ other		resent	venicie	Jewei	
(Cannot reorder les					YOUR LOGO HERE	YOUR LOGO HERE	YOUR LOGO HERE GIFT CARD
			YOUR L	OGO HERE	E E E E E E E E E E E E E E E E E E E	Citt Card	2
			E H	laircut	Exercise	Café	Unwind
		N	ARKETING M	ATERIAL	S		
		A A A					
Card Carrie	er:	\$.20 ea	Failfan		Sub Total	\$	
			Give a GIFT CARD To Schreene Specie Today			Ψ	·
Acrylic Dis	play w/sign:	\$6.50 ea	A Parties Garage		Tax (if applicable) \$		
		•	GIFT CARD		Shinning	<mark>\$</mark> ТВ[
Round De	cal:	\$1.00 ea			Shipping	Φ	·
			CHT CARD		🗌 Ground		
Counter To	p Tent:	\$2.50 ea			🗆 Next Day		
			Chura				
Static Cling] :	\$2.50 ea	To Someone Special Today		Total	\$	
			Inquire Within				
			Method of Pay	<u>ment</u>			
Bill To:		Con	npany or Card Holder's	a Noma			
l authorize GETI,	to debit the followin		. ,		th equipment, shipp	oing, and any additio	onal fees thereof.
Credit Card # : Type of Card:						Exp. Date:	
			OR	D			
	checkbox if you	i would like	us to bill your	Bank Ac	count on file		
Signature:	Merchant signati		if hilling march	nt directly	for oard ander		
	werchant signat	are required	n billing mercha	an drectly	ior caru order		

