

Dear Customer:

Many of you have requested this form to help you in ordering your stamps. Please save this as your original, make a few copies and keep handy to your fax machine. We appreciate your business and look forward to serving you.

Date: ____ / ____ / ____



C/C# _____

Exp. _____

PRINT STYLE

- ARIAL • arial 1234 & **Bold • Bold Italic • Italic**
- TIMES • times 1234 & **Bold • Bold Italic • Italic**
- Park Avenue • 1234 & Not available in all caps/bold/italic*
- COPPERPLATE • 1234 & NOT AVAILABLE IN ALL CAPS/BOLD/ITALIC**

FAX - A - STAMP[®]

Fax: (207) 848-7400

1 Printer's Drive • Hermon, ME 04401
Phone: (207)848-7300

SPECIAL INSTRUCTIONS

- Flush Left
- Centered
- ALL CAPITAL LETTERS
- Bold Letters**
- Italic Letters*

P.O.# _____

BILL TO: NAME: _____

SHIP TO: NAME: _____

ADDRESS: _____

ADDRESS: _____

PHONE: _____

ORDERED BY: _____

SAME AS BILLING ADDRESS? YES NO

STAMP #1

REGULAR

SELF-INKING

QUANTITY _____

SELF INKING
NAME OR PRODUCT #

COLOR
 BLACK RED BLUE

STAMP #2

REGULAR

SELF-INKING

QUANTITY _____

SELF INKING
NAME OR PRODUCT #

COLOR
 BLACK RED BLUE

STAMP #3

REGULAR

SELF-INKING

QUANTITY _____

SELF INKING
NAME OR PRODUCT #

COLOR
 BLACK RED BLUE