

FAX ORDER FORM

The Packaging Team LLC.

Place your order 24 hours a day!
 Fax your order to 978-674-0042
 Or E-Mail your Company P.O.
 To: boxman3136@aol.com

Please check off form of payment

Credit Card Number _____ Security Code _____

--	--	--	--	--	--	--	--	--	--	--	--	--

<input type="checkbox"/>	AMERICAN EXPRESS
<input type="checkbox"/>	VISA
<input type="checkbox"/>	MASTER CARD
<input type="checkbox"/>	CHECK or M.O.
<input type="checkbox"/>	C.O.D.

P.O. # _____

Name (exactly as it appears on the card) _____

Date: _____

Card Expiration Date _____

Credit card billing address if different
 From Company address _____

ORDERED BY:

Your name _____

Company _____

Street Address _____

Attention Of _____ P.O. Box _____

City _____ ST _____ ZIP _____

Fax # _____ Tel. # _____

E-Mail _____

SHIP TO:

Company _____

Street Address _____

Attention Of _____

City _____ ST _____ ZIP _____

This address is a: Business _____ Residence _____

For common carrier truck deliveries, do you require inside
 Deliveries? No _____ Yes _____ (\$35.00 additional cost if yes)

<u>Item Number</u>	<u>Description</u>	<u>QTY.</u>	<u>x Unit Price</u>	<u>= Total</u>

If ordering more than seven items, please include attachment sheet.	SUBTOTAL
	SALES Tax If Applicable
	SHIPPING
	Orders under \$100.00 Add \$5.95
	Total

All orders will automatically be shipped by us in the most cost effective manner from locations in Massachusetts, New York, Chicago, or California, unless the request for shipping cost quote box is checked. Orders normally ship within 48 hours.

Please check this box to receive a shipping cost quote before we process your order.