

## FAX or MAIL ORDER FORM



**MICRO MATIC**

**Certified Installer**

### PRINT and FILL OUT

**FAX to: 262-242-7266 or MAIL to: Christy Company**

6916 Waunakee Circle, Mequon, WI 53092

Questions or need more info e-mail: [Orders@ChristyGraphics.com](mailto:Orders@ChristyGraphics.com)

**Ask about other apparel and styles**

### Micro Matic Shirts

ITEM # *	COLOR	SIZE	LOGO/NAME INFORMATION	QTY	UNIT PRICE	ADD NAME \$5.00 ea.	ADD'L LOGO \$11.50 ea.	TOTAL
			<input type="checkbox"/> Add name _____ <input type="checkbox"/> Add logo (Provide Hi-Res Vector file)					
			<input type="checkbox"/> Add name _____ <input type="checkbox"/> Add logo (Provide Hi-Res Vector file)					
			<input type="checkbox"/> Add name _____ <input type="checkbox"/> Add logo (Provide Hi-Res Vector file)					
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			<input type="checkbox"/> Add name _____ <input type="checkbox"/> Add logo (Provide Hi-Res Vector file)					

#### \* ITEM NUMBERS

LONG SLEEVE Cotton ..... 01

SHORT SLEEVE Cotton ....02

POLO SHIRT Jersey ..... 03

#### UPS Shipping + Handling

QTY RATE

1-5 shirts .....\$15.99 per order

6-10 shirts .....\$21.99 per order

+10 shirts ..... \$2.00 ea. shirt

\$50.00 one-time Additional Logo charge

SUB TOTAL (Merchandise)

SHIPPING & HANDLING (See table at left)

TOTAL

#### PAYMENT METHOD

☐ Check ☐ Money Order (ENCLOSED) Payable to: **Christy Company**

**CREDIT CARD** ☐ Master Card ☐ Visa ☐ Discover Card

CREDIT CARD NUMBER

□□□□-□□□□-□□□□-□□□□

SECURITY CODE \*  
(from back of card)

□□□

EXPIRATION DATE:

mo\_\_\_\_\_ yr\_\_\_\_\_

**FOR YOUR PROTECTION AND SECURITY** As part of our commitment to your security, we take all reasonable precautions to protect your personal information.

\*Required to process your order.

#### SHIP TO:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_