

### Scratch Card Order Form

**Contact**

Organization's Name \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_



**Rates**

Check off Quantity.

Quantity	2" x 3.5"
<input type="checkbox"/> 250	\$195
<input type="checkbox"/> 500	\$395
<input type="checkbox"/> 1,000	\$495
<input type="checkbox"/> 2,500	\$695
<input type="checkbox"/> 5,000	\$895
<input type="checkbox"/> 10,000	\$1,095
<input type="checkbox"/> 15,000	\$1,295
<input type="checkbox"/> 20,000	\$1,495

**Prize Odds** The cards are printed with up to 6 prize levels. You determine the prize and quantity. Maximum of 15 characters per prize.

Prize	Quantity
Prize 1: _____	_____
Prize 2: _____	_____
Prize 3: _____	_____
Prize 4: _____	_____
Prize 5: _____	_____
Prize 6: _____	_____

**Total Cost**

All orders are paid in full prior to shipping. Orders will ship upon approval of payment.

Fill in all that apply. Any Questions? Just Call 1-866-831-9902

Quantity	_____
Cost	\$ _____
Design	\$ _____
Shipping	\$ _____
Tax 7% Only in Florida	\$ _____
<b>TOTAL DUE</b>	\$ _____

**Payment Method**

Visa  MasterCard  American Express  Check No: \_\_\_\_\_

Credit Card No: \_\_\_\_\_

Expiration Date \_\_\_\_\_ Verification Code \_\_\_\_\_

Card Holder Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**Internal Use Only**

Date \_\_\_\_\_ Order \_\_\_\_\_

Sales Rep \_\_\_\_\_ Other \_\_\_\_\_

**Authorized** Date \_\_\_\_\_

I agree to all terms and conditions of sale as presented on this form. No refunds.

Authorized Signature \_\_\_\_\_