ORDER/REORDER FORM [FLORIDANATURAL] OFFICIALLY LICENSED MERCHANDISE

CHECKS [150 SINGLES/150 DUPLICATES PER BOX]

FloridaNatural: FloridaWild [Design Number: WIL]

			SHIP/HANDLING Regular	SHIP/HANDLING Fast Mail	TOTALS
☐ 150 Singles	[checks start at number: _____]	$19.95	☐ $1.95	☐ $6.45	_____
☐ 300 Singles	[checks start at number: _____]	$39.90	☐ $3.90	☐ $8.40	_____
☐ 450 Singles	[checks start at number: _____]	$59.85	☐ $5.85	☐ $10.35	_____
☐ 600 Singles	[checks start at number: _____]	$79.80	☐ $7.80	☐ $12.30	_____
☐ 150 Duplicates	[checks start at number: _____]	$21.95	☐ $1.95	☐ $6.45	_____
☐ 300 Duplicates	[checks start at number: _____]	$43.90	☐ $3.90	☐ $8.40	_____
☐ 450 Duplicates	[checks start at number: _____]	$65.85	☐ $5.85	☐ $10.35	_____
☐ 600 Duplicates	[checks start at number: _____]	$87.80	☐ $7.80	☐ $12.30	_____

COVERS [DESIGNED TO FIT 6" x 2 3/4" TOP-TEAR CHECKS]

SUBTOTAL _____ A

		Regular
☐ **Rainbow Springs Aquatic Preserve** [Design Number: Y06V]	____# of covers x $6.95	____# of covers x $1.95 _____
☐ **Tampa Bay** [Design Number: Y07V]	____# of covers x $6.95	____# of covers x $1.95 _____
Send covers **Fast Mail.**		.....add $4.50 _____

SUBTOTAL _____ B

IMPORTANT INFORMATION

If you are ordering checks, you must include:
[1] A reorder form or a voided check from your existing check supply. Indicate any printing changes to your personal and bank information on the voided check.
[2] A deposit slip from your existing check supply.
[3] If you don't supply a starting check number, we will automatically start your checks at 1001.

How did you find our Web site?

☐ **Friend/Family** ☐ **Search Engine:** _____ ☐ **Magazine Ad:** _____ ☐ **Other:** _____
Name Name

First & Last Name:

Shipping Address [This address **WILL NOT** be printed on your checks if it is different from your reorder form or voided check. Include apartment or suite number.]**:**

City: **State:** **Zip:** _____ – _____

Daytime Phone:* [___] ___ – ____

Evening Phone:* [___] ___ – ____

E-Mail:

*We will only call you if we need information to finish processing your order.

PAYMENT METHOD

☐ Check enclosed. Make payable to: The Anthony Grandio Company. [We will not process this order until payment is received.]
☐ Credit card: ☐ Visa ☐ MasterCard ☐ American Express

Account Number: ____ – ____ – ____ – ____

Expiration Date: __ __ / __ __ Authorized Signature: _____

TOTALS

☐ If a Florida resident or shipping into the state of Florida, add 7% sales tax. ..... _____ T

QUESTIONS? Call 800-472-6346.

MAIL TO: The Anthony Grandio Company
P.O. Box 23098
Jacksonville, Florida 32241-3098

FAX TO: 904-636-7406

GRAND TOTAL: A+B+T= _____ G

Please allow 3 to 4 weeks delivery for regular shipping, 2 to 2 1/2 weeks for Fast Mail shipping (from the time we receive your order). Products are often received faster than this.

YAGCOM