

# Kings Fool Order Form

## Customer Info

P.O.#	Date Ordered:	Ship Date:
Company Name:		
Contact Person:	E-mail:	
Phone:	Fax:	Beeper/Cell:

## Delivery Instructions

Via:	Special Instructions	
Name:		
Address 1:		
Address 2:		
City:	State:	Zip:

## Business Card Info (Print Clearly)

Text	Font Name	I	B	Points	Actual Size

For reference purposes only: Each line will comfortably hold a 10pt. Font.  
 Mix the number of lines and point sizes to not exceed 120 points per card.  
 \*Or send your own digital image file 30 x 55 mm.

**Roughly draw  
business card  
in window above**

Image File Name	Position	% Opacity

## Ordered Product Desc. Qty. Ordered Price Quoted

1) Kings Fool Customized Business Cards		\$
2) Setup Fee		\$
3) Vinyl-Coated Paper Clips (assorted colors, 1000/Tub)		\$
4) Shipping (as per instructions)		\$

<b>AUTHORIZING SIGNATURE:</b>	<b>DATE:</b>
-------------------------------	--------------

\* Image file types accepted, in order of preference and quality for final product: 1).eps, 2).psd, 3).tiff, 4).gif, 5).jpg CMYK - 300 dpi minimum resolution

# New Account Application Form

## COMPANY INFORMATION

Business Name:

Date:

Contact:

Phone:

E-mail:

Fax:

Shipping Address:

City:

State:

Zip:

Billing Address:

City:

State:

Zip:

Corporation  Partnership  Sole Proprietor  Government Agency  Other

TAX STATUS  Non Exempt  Exempt - Certificate Required ID Resale Tax #:

## COMPANY PURCHASING CONTACT

Name:

Title:

E-mail:

Phone:

## ORDER PAYMENTS

Check #  Credit Card Type:

Name on Credit Card:

Credit Card Number:

Exp. Date:

TERMS: This form is for C.O.D. Customers information. All orders require a deposit upon placement of order and balance on order shipment. If payment is made by check, receipt of Funds must be made prior to order placement and shipment. It is further acknowledged that all expenses incurred in collecting amounts owed Kipp Sherry, Kipp Sherry Magic, including reasonable attorney's fees, will be the customer's responsibility. It is agreed that venue in any legal action shall be in Ada County, Idaho.

If payment by Credit Card, this form authorizes Kipp Sherry Magic to bill our credit card for the total of \$ \_\_\_\_\_

Signature:

Date:

Make all payments to:

Kipp Sherry Magic  
6205 N. Hastings Ave.  
Boise, ID 83714

Phone: 1+ 208-853-3878  
E-mail: [kipp.sherry@kipsherrymagic.info](mailto:kipp.sherry@kipsherrymagic.info)  
Web: [www.kipsherrymagic.info](http://www.kipsherrymagic.info)