



418 EXCHANGE STREET, GENEVA, NY 14456
 315-789-0315 ~ FAX 315-789-9514
 EMAIL: halex@rochester.rr.com

FAX/MAIL ORDER FORM

Date _____

Date DUE _____

NEW ACCOUNT EXISTING ACCOUNT

SHIP TO

Name _____
 Business _____
 Address _____

 City _____ State _____ Zip _____
 Phone _____
 Fax _____
 E-mail _____

BILL TO

Name _____
 Phone _____
 Business _____
 Address _____

 City _____ State _____ Zip _____
 Payment Option Bill PO# _____
 Visa MC
 _____ Exp ____/____
 Signature _____

Item Number	Description	Price	Quantity	Total

ENGRAVING / ETCHING / IMPRINTING INFO
 (PLEASE PRINT CLEARLY OR SEND ADDITIONAL PAGES)

SUBTOTAL

THIS SECTION WILL BE FILLED OUT BY
 HALEX AWARDS INC.

VOLUME DISCOUNT	_____
Engraving _____	_____
Letters @ .15/ltr _____	_____
Engraving _____	_____
Logo @ \$6.50 _____	_____
Artwork Setup _____	_____
hrs. @ \$18.00 _____	_____
Misc. _____	_____
Charges _____	_____
Sales Tax _____	_____
7.50% _____	_____
Shipping _____	_____
Charges _____	_____
TOTAL	<input style="width: 100px; height: 30px;" type="text"/>