

Expressive
by BAKER WALLS
Walls

BILL TO:					SHIP TO:						
Company:					Company:						
Address:					Address:						
City:		State:		Zip:		City:		State:		Zip:	
Phone:			Fax:		Phone:			Fax:			
Buyers Name:					Attention:						
Email:					Email:						
Date		Cust. No.		PO #		Terms		Sold By		<input type="checkbox"/> New Account <input type="checkbox"/> Reorder	

QTY. <input type="checkbox"/>	ITEM NO.	COLOR(S)	SIZE <input type="checkbox"/>	DESCRIPTION <input type="checkbox"/>	UNIT PRICE		TOTAL	

<input type="checkbox"/> CASH <input type="checkbox"/> CHECK # _____ <input type="checkbox"/> CREDIT CARD					_____ % DISC			
CREDIT CARD APPROVAL FORM (Per your approval, the total order + shipping charges will be charged to your credit card upon order completion. You will receive an invoice of total charges with order.					SUBTOTAL			
VISA or MASTERCARD # <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> </div> </div> <div style="display: flex; justify-content: space-between;"> <div> EXP. DATE <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> </div> <div> VER. CODE <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> </div> </div>					SHIPPING			
CARD HOLDER'S NAME _____					DEPOSIT			
SIGNATURE _____					TOTAL			
DATE _____								