



www.foodmontage.com



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7865 Southpoint Drive ~ Camden, Missouri 64017

GIFT BOX ORDER FORM

Orders must be submitted no later than Friday, November 20, 2009. All boxes will be delivered to Address specified below on Thursday, December 10, unless a different delivery date is agreed upon.

First Name: _____

Last Name: _____

Company: _____

Address: _____

Phone: _____

E-mail Address: _____

| Item | Number Ordered | Per Unit Price | Total Per Item |
|----------------|----------------|----------------|----------------|
| 1/2 Lb Boxes:* | | X 11.50 | \$ |
| Trays for 10: | | X 24.50 | \$ |
| Trays for 25: | | X 49.50 | \$ |
| Trays for 35: | | X 59.50 | \$ |

*If ordering 1/2 Lb boxes a minimum order of 5 boxes is required.

If paying by Cash or Check, payment is due upon completion of the order form. If paying by Credit Card, I authorize Food Montage, Inc. to charge the above Total Due to my credit card on or before November 20, 2009 to complete my order. Orders are only considered complete when payment is received. All orders must be complete no later November 20, 2009.

| | |
|--|----|
| SUB-TOTAL | \$ |
| SALES TAX (Sub-Total X 6.225%) | \$ |
| TOTAL DUE | \$ |

Method of Payment: Cash Check Mastercard Visa American Express
(Circle One)

Credit Card Number: _____

Exp Date: _____

Sec Code (3 digits) : _____

Zip Code: _____

Signature: _____

Date: _____

Please return completed form via email to office@foodmontage.com or by fax 816-770-2453