

Art Order Form

Name: _____

Company / Organization: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone: _____ Ext.: _____

Payment Enclosed:

Check

Money Order

IMAGE NUMBER

DESCRIPTION

COST

IMAGE NUMBER	DESCRIPTION	COST
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Cost

FedXShipping (2nd day delivery, add \$25.00)

TOTAL ENCLOSED

Authorized Signature: _____

Stainglass Art not available in print form

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