



Foxyware, Inc. ~PO Box 880655
 Port Saint Lucie, Florida 34988
 E: cs@foxyware.com Phone : 877-241-6134
 Fax: 877-241-6134 or 772-882-4813

Order Form/Credit Card Authorization

Company Name~ _____ **Date:** _____

Ship To Address~ _____

City, State, Zip~ _____

Bill To Address~ _____

City, State, Zip~ _____

Buyer Name~ _____ **In hands date~** _____

Phone~ () _____ **Fax~()** _____ **PO#~** _____

Email~ _____ **Tax ID~** _____ **UPS#~** _____

Master Card Visa Discover AmEx PayPal

card number _____ - _____ - _____ - _____

expiration _____ - _____ security code _____

Billing Address for credit card~ _____
 (if different from above)

Name on Card: _____ Signature: _____

| Quantity | Item Description | Cost/ea | Sub-Total |
|--|------------------|---------|--------------|
| | | | |
| | | | |
| | | | |
| **IMPORTANT INFORMATION ABOUT YOUR ORDER: | | | TOTAL |

Your order will be processed once we receive completed order form/cc authorization form AND signed proof. Foxyware will not be responsible for any delays if proper forms are not received.

Thank you for your business! Have a Sparkly Day! :-)