

# Basket Kase Fax Order Form – Fax (360) 652-3464

Date Ordered:	Delivery Date:
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**Bill To:**
**Ship To:**

Name:	Name:
Company:	Company:
Address:	Address:
City/State/Zip	City/State/Zip
Phone:	Phone:
Fax:	Fax:
E-Mail:	E-Mail:
	Ok to leave at door? Yes No

Type of Basket ( Please circle One)

New Baby (Boy or Girl)	Sympathy	New Home	Holiday	Get Well
Sympathy	Thank You	Birthday	Congrats	Holiday

Budget – Shipping Delivery Fee Not Included (Please Circle One)

Special Request:

\$45.00   
  \$50.00   
  \$75.00   
  \$100.00   
  \$125.00   
  \$150.00   
  \$175.00   
  \$200.00   
  \$250.00

Delivery Method (Please circle one) Hand Delivery    Shipped via UPS

*Shipping and Delivery Fees start at \$13.00 and will be confirmed via email with delivery information*

Message on Enclosure Card:

### Billing Information

Credit Card Number	Type of Credit Card Visa            American Express            MasterCard
Name as it appears on Credit Card	Name of Person Ordering
Phone Number	Email Address

--Office Use Only--

Process Date	AC/Ref	Ship/Delivery Date
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