

1 Xtreme Graphic Libraries Order Form

Document Version: 10.02.09



Please fill out the below and fax order to Taylor Digital Imaging (1.506.778.8088). Taylor Digital Imaging will keep all information entered on this form strictly confidential. *NOTE: We will not be able to release your order until this form is filled out, signed and sent back to us.*

1 ORDER DETAIL:

Description	Quantity	Cost per Unit	Sub-Total
Air Brush Madness – Vol. 1 (2 DVD collection)			
Air Brush Madness – Vol. 2 (2 DVD collection)			
Xtreme Wrap Master – Vol. 1 (2 DVD collection)			
Xtreme Wrap Master – Vol. 2 (2 DVD collection)			
Xtreme Graphic Kits - Mega Collection 1: Volumes 1 to 4 (2 DVD collection)			
Xtreme Graphic Kits - Mega Collection 2: Volumes 5 to 8 (2 DVD collection)			
GRAND TOTAL:		n/a	

2 PAYMENT INFORMATION:

Payment Type: VISA MasterCard American Express

Company Name _____ Name on Credit Card _____

Credit Card # _____ Date of Expiry (Month/Year) _____

Security Code _____ NOTE: For Visa and MasterCard, this is the last three digits on the back of the card. For American Express, this is the four digit code on the front above the card number.

Credit Card Billing Address:

Street Address _____ City _____

Province/State _____ Postal/Zip Code _____ Country _____

Authorization:

I authorize Taylor Digital Imaging to charge my credit card for the amount of \$ _____

I authorize Taylor Digital Imaging to charge my credit card for future purchases verbally approved by me: Yes No

Signature of Cardholder _____ Date (DD/MM/YYYY) _____

3 SHIPPING INFORMATION: (If different from address above.)

Street Address _____ City _____

Province/State _____ Postal/Zip Code _____ Country _____

I authorize Taylor Digital Imaging to ship my order to the above address: Initials _____

Thank you for your order!