



Order at www.cardsforarchitects.com through October 31 and receive a 15% discount! (on-line orders only, not for faxes)

Card Name	Quantity	Price/Card	Total

Imprinting Inside Cards (free)	
Check Here	Greeting
	(Write your own here)
	No Greeting
	Happy Holidays!
	Wishing You a Creative and Joyful Holiday Season and a Peace Filled New Year
Company Name	
<input type="checkbox"/> No company name	
Indicate both greeting and company name. Attach sheet if necessary.	
<input type="checkbox"/> Red ink (standard)	<input type="checkbox"/> Black ink
<input type="checkbox"/> Times Roman	<input type="checkbox"/> Georgia <input type="checkbox"/> Arial
<input type="checkbox"/> Comic Sans MS	<input type="checkbox"/> Verdana

Subtotal	
Less 10% discount for both blank cards & envelopes	
Extra charge to use logos or special fonts (\$50 per file)	
Subtotal	
Tax (9.75% for shipments in Illinois only)	
Total (without shipping)	
Shipping (see shipping note below)	
Total	

Pricing (includes imprinting)	
Quantity	Price/Card
50-100	\$2.00
125-250	\$1.75
275-400	\$1.50
425-800	\$1.30
825-1000	\$1.15
Over 1000	\$1.00

Order in multiples of 25. Price is for each design with same imprinting.

Company Name & Return Address on Envelope (free)
<input type="checkbox"/> No name and address on envelope
<input type="checkbox"/> Return address on front, upper left hand corner
<input type="checkbox"/> Return address on back flap (centered)

Shipping
Check One:
<input type="checkbox"/> FedEx Ground (standard)
<input type="checkbox"/> FedEx Overnight
<input type="checkbox"/> FedEx 2day
Shipping rate will be added to charged orders. If paying by check, please check freight rates on-line at our website.

Specials (\$50 extra)
<input type="checkbox"/> Add logo inside card under greeting
Please check one below:
<input type="checkbox"/> Logo only
<input type="checkbox"/> Logo with company name
Please email logo to info@cardsforarchitects.com
<input type="checkbox"/> Use custom font if available. Specify font:

Shipping/Ordering Information			
Contact:	Title:		
Company:			
Address:			
(No P.O. Boxes)			
City:	State:	Zip:	
Phone:	Fax: (Mandatory)	Email:	

Payment

Check enclosed Check to follow faxed order Charge to: Visa MasterCard American Express

Card Number _____ Expiration Date _____ Signature _____

Card Holders Name _____ Card Holders Address _____ Zip _____

If you have a logo or special fonts, you will receive a proof of the imprinting by fax or email for your approval. We must get your approval for both the card and the envelope before we print. Proofs will not be sent on simple, straight forward imprinting.