PRODUCT ORDER FORM

Please complete and fax to 845.246.0508 or email to orders@organicnectars.com

Today's Date: _____

CUSTOMER INFO:

Contact Name: _____ Tel: _____

Company: _____ Email: _____

PAYMENT INFO: select one: Mastercard ☐ Visa ☐ Discover ☐ Paypal ☐ (send to orders@organicnectars.com)

Name on card: _____ Tel: _____

Credit card #: _____ Expy date: _____ 3-digit sec code: _____

Billing Address: _____

_____

SHIPPING INFO:

Indicate if this is a residence or business address: ☐ (Residence) . ☐ (Business)

Contact Name: _____ Tel: _____

Company: _____ Email: _____

Address: _____

_____

Special requests: _____

PRODUCT NAME & FLAVOR	UNIT SIZE	QTY (indicate units of cases)	PRICE*

*Delivery charges will be added based on total weight and destination address.

click submit when done for emailing and saving options

SUBMIT

T: 845.246.0506 **F**: 845.246.0508 **E**: orders@organicnectars.com