

<b>ORDERED BY (PLEASE FILL OUT EACH FIELD)</b>			
NAME:			
COMPANY:			
STREET ADDRESS:			
CITY, STATE & ZIP:			
TELEPHONE:			
EMAIL:			
<b>SHIP TO</b>			
NAME:			
COMPANY:			
STREET ADDRESS:			
CITY, STATE & ZIP:			
TELEPHONE:			
<input type="checkbox"/> OVERNIGHT <input type="checkbox"/> EXPEDITED (2-3 DAYS) <input type="checkbox"/> STANDARD (3-4 DAYS)			
FOR KARMAL FRESHNESS, PLEASE SCHEDULE DELIVERY BY/ON THIS DATE: _____			
<b>GIFT MESSAGE</b>			
<b>PAYMENT METHOD</b>			
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMERICAN EXPRESS			
CREDIT CARD NUMBER: _____ EXPIRATION DATE: ____/____			
SECRET CODE _____ SIGNATURE: _____			
<b>PRODUCT ORDERED</b>			
<u>ITEM NAME</u>	<u>QUANTITY</u>	<u>UNIT COST</u>	<u>TOTAL</u>

PLEASE FAX TO 406.585.2466 OR MAIL TO  
 GOOD KARMAL, P.O. BOX 817, BOZEMAN, MT 59771  
 THANK YOU!