

LENZ ARTS PRINTING PAPER ORDER

Once completed, please fax to 831.423.6840 or mail to 142 River Street, Santa Cruz, CA 95060.

Sheets Qty: _____ **WHITE BFK** 250g 22x30 **\$527.00** per 100 (**\$0** FedEx per 100)
Sheets Qty: _____ **WHITE BFK** 280g 22x30 **\$625.00** per 100 (**\$0** FedEx per 100)
Sheets Qty: _____ **CREAM BFK** 280g 22x30 **\$625.00** per 100 (**\$0** FedEx per 100)
Sheets Qty: _____ **TAN BFK** 280g 22x30 **\$625.00** per 100 (**\$0** FedEx per 100)
Sheets Qty: _____ **GRAY BFK** 280g 22x30 **\$625.00** per 100 (**\$0** FedEx per 100)
Sheets Qty: _____ **Arches Cover WHT** 250g 22x30 **\$528.00** per 100 (**\$0** FedEx per 100)
Sheets Qty: _____ **Arches 88** 300g 22x30 **\$625.00** per 100 (**\$0** FedEx per 100)

**Cream, Tan and Gray may be assorted in units of 50 to reach a quantity of 100.*

[Prices are subject to change without notice, we will contact you if pricing has changed.]

Customer: _____

Shipping Address: _____

City: _____ State: _____ ZIP: _____

Phone: (_____) _____ - _____

e-mail: _____

Credit Card type: Visa MasterCard

Credit Card Number: _____ - _____ - _____ Expiration Date: _____ - _____

Security (VID) Number (the rightmost three digits in the signature box on back of card): _____

CARD BILLING ADDRESS (IF NOT THE SAME AS SHIPPING ADDRESS):

Cardholder Name: _____

Billing Address' STREET NUMBER ONLY: _____

Billing Address' ZIP CODE ONLY: _____

Phone number of Card Holder: (_____) _____ - _____

I authorize Lenz Arts, Inc. to charge my credit card for this purchase. I agree to pay any charges according to my card issuer's agreement.

Cardholder Signature: _____ Date: _____

Comments: _____



142 River Street
Santa Cruz, CA 95060
831.423.1935 sales
831.423.6840 facsimile
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