Order Form

343 South River Street Hackensack, NJ 07601 PH: 800.425.4778 201.342.9155 FAX: 201.342.1438

Date: Requested Ship Date: PO #

Bill To: Ship To: Same ☐

Name: Name:

Address: Address:

Phone: Fax: Phone: Fax:

Email: Email:

Note: All orders will be shipped via ground service (best available rate) unless otherwise specified:

QUANTITY	ITEM #	DESCRIPTION	COST	EXTENSION
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00

A $10.00 small order charge will be applied to all orders under $100.00 . Shipping Charges will be added to invoice. **TOTAL** 0.00

Method of payment: ☐ Visa ☐ MasterCard ☐ Discover ☐ AmEx ☐ Payment Enclosed

Credit Card # Security Code:

Name on Card: Expiration Date:

Billing Address (For Card)

I accept the terms and conditions as outlined in the section of the Clip Strip Corp. Catalog covering general terms and conditions.

Authorized Signature: Date:

Fax completed form to:
201-342-1438

or Mail to:
Clip Strip Corp. 343 S. River St., Hackensack, NJ 07601