



STAFF ONLY
Taken by _____
Status _____

Date of order: _____

Contact Information

Customer Name _____

Address _____

Phone _____ Cell _____ email _____ Fax _____

Credit Card # _____ Exp. _____ Security code _____

Shipping Information

Ship To Arrive By _____ (OR) Customer Pick up date _____

(Ship To) Name* _____

Address _____

Phone _____ * For multiple addresses please call for a multiple form.

Enclosure Card

(limit to 50 characters) _____

My Goody Order

GOODY BAGS

(Flavors): Traditional, Dbl. Crossed, Nutty Twist, Dbl. Trble., Crème de la Crunch, Classic PB, 2 Alarm PB, Sweet & Salty, Cinnfully Hazel., Comfort & Joy (seasonal)

Select:

1/4 POUND GOODY BAGS: (Qty.) _____ Flavor Selection (1): _____

1/2 POUND GOODY BAGS: (Qty.) _____ Flavor Selections (1 or 2): _____

1 POUND GOODY BAGS: (Qty.) _____ Flavor Selections (1, 2 or 4): _____

GOODY BOXES

Select:

1/2 POUND GOODY BOX: (Qty.) _____ Flavor Selection (1 or 2): _____

1 POUND GOODY BOX: (Qty.) _____ Flavor Selections (1, 2 or 4): _____

2 POUND GOODY BOXES: (Qty.) _____ Flavor Selections (1, 2 or 4): _____

CUSTOMIZATION: Alternate Secondary Ribbon Color? (refer to website for colors) _____

Customization of closure seal message (minimum fee applies) _____

Add your logo or graphic to our closure seal? (minimum fee applies) Yes _____ No _____

Call for large orders or corporate discounts. 480-575-0737 or 877-865-7476

PLEASE FAX TO 480.575.0317