



ORDER FORM

FAX ORDERS: Please do NOT mail a duplicate copy of your order.

7001 Lomas Blvd., NE
 Albuquerque, NM 87110
 (505) 265-7731
 Fax (505) 265-0354
 www.buffettscandies.com

FOR OFFICE USE ONLY

DATE REC'D. / / EST. SHIP DATE / /

PHONE ORDER ACCEPTED BY

Please order early. For assured freshness, holiday wrapped candy will not be shipped until Dec. 10, unless otherwise requested by you, our customer. A gift card will be enclosed to let your recipients know that you cared enough to share Buffett's Candies, the best of the Southwest, with them, or you can include a card with this order.
 We ship throughout the Continental U.S. All orders must have deliverable street address and zip code. NO APO'S, FPO'S, or P.O. BOXES PLEASE.
 Use only one shipping charge per address.

FROM _____ PLEASE PRINT CLEARLY

NAME _____ HOME PHONE _____ DESIRED SHIP DATE / /
 STREET ADDRESS _____ WORK PHONE _____ CELL PHONE _____
 CITY _____ STATE _____ ZIP _____ EMAIL _____

PLEASE INCLUDE MY EMAIL IN BUFFETT'S CANDIES EMAIL LIST.

PLEASE SHIP THE ITEMS IN THIS SECTION TO ME.

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			
3			
4			
5			
SPECIAL INSTRUCTIONS		TOTAL BOXES	SHIPPING
		TOTAL POUNDS	SUBTOTAL

PLEASE SHIP THE ITEMS IN THIS SECTION TO THE FOLLOWING PEOPLE.

GIFT 1 SHIP TO NAME _____ PHONE _____ DESIRED SHIP DATE / /
 STREET ADDRESS _____ GIFT CARD TO READ _____
 CITY _____ STATE _____ ZIP _____

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			
3			
SPECIAL INSTRUCTIONS		TOTAL BOXES	SHIPPING
		TOTAL POUNDS	SUBTOTAL

CHECK OR MONEY ORDER PAYABLE TO BUFFETT'S CANDIES NO C.O.D SHIPMENTS

CREDIT CARD NO. _____ EXP. DATE / / VERIF. CODE _____

CUSTOMER SIGNATURE **X** _____ PAGE _____ OF _____

PRINTED NAME OF CARDHOLDER _____

TOTAL GIFTS ON BACK		
SUBTOTAL		
NM RESIDENTS 6.875% SALES TAX		
TOTAL AMOUNT		

Thank You!

GIFT 2 SHIP TO NAME _____ PHONE _____ DESIRED SHIP DATE ____/____/____
 STREET ADDRESS _____ GIFT CARD TO READ _____

CITY _____ STATE _____ ZIP _____

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			

SPECIAL INSTRUCTIONS	TOTAL BOXES	SHIPPING
	TOTAL POUNDS	SUBTOTAL

GIFT 3 SHIP TO NAME _____ PHONE _____ DESIRED SHIP DATE ____/____/____
 STREET ADDRESS _____ GIFT CARD TO READ _____

CITY _____ STATE _____ ZIP _____

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			

SPECIAL INSTRUCTIONS	TOTAL BOXES	SHIPPING
	TOTAL POUNDS	SUBTOTAL

GIFT 4 SHIP TO NAME _____ PHONE _____ DESIRED SHIP DATE ____/____/____
 STREET ADDRESS _____ GIFT CARD TO READ _____

CITY _____ STATE _____ ZIP _____

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			

SPECIAL INSTRUCTIONS	TOTAL BOXES	SHIPPING
	TOTAL POUNDS	SUBTOTAL

GIFT 5 SHIP TO NAME _____ PHONE _____ DESIRED SHIP DATE ____/____/____
 STREET ADDRESS _____ GIFT CARD TO READ _____

CITY _____ STATE _____ ZIP _____

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			

SPECIAL INSTRUCTIONS	TOTAL BOXES	SHIPPING
	TOTAL POUNDS	SUBTOTAL

GIFT 6 SHIP TO NAME _____ PHONE _____ DESIRED SHIP DATE ____/____/____
 STREET ADDRESS _____ GIFT CARD TO READ _____

CITY _____ STATE _____ ZIP _____

QTY.	DESCRIPTION	UNIT PRICE	EXTENSION
1			
2			

SPECIAL INSTRUCTIONS	TOTAL BOXES	SHIPPING
	TOTAL POUNDS	SUBTOTAL

ADDITIONAL GIFTS? PLEASE INCLUDE YOUR LIST(S) AND INSERT TOTALS ON FRONT. PAGE _____ OF _____

TOTAL AMOUNT THIS PAGE	
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