TAGCO ®
USA Inc.
THE AMERICAN GIFT COMPANY

Sales Order Form

Order Date (mm/dd/yy)

Bill To:

_____
Company Name

_____
Address

_____
City, State/Prov, Zip

_____
Country

_____
Attn: Person

_____
Phone

Ship To: ☐ **Use billing address for shipping**

_____
Company Name

_____
Address

_____
City, State/Prov, Zip

_____
Country

_____
Attn: Person

_____
Phone

SKU #	SIZE	QTY	PRICE	PRODUCT NAME	TOTAL

The undersigned is a duly authorized purchasing agent of the above referenced organization and is authorizing the purchase of this equipment.

_____   _____   _____   _____
Credit Card Number   Name on the Credit Card   Exp. (mm/yy)   Billing Zip Code

Sub Total*

Tax and shipping charges will be added to this sub total when applicable.