Kansas City Kreations

WHOLESALE ORDER FORM

Customer Information:

Company Name _____

Buyer Name _____

Email _____ Phone Number _____

Shipping Address _____

City _____ Prov/State _____ Postal/Zip Code _____

Website _____ Sales Tax ID and State _____

INVOICE WILL BE SENT TO E-MAIL ABOVE PRIOR TO SHIPPING.

SEE WHOLESALE POLICIES PAGE FOR PRICING OR YOU MAY LEAVE PRICE BLANK

Options & Pricing:

QTY.	ITEM	SIZE (OR N/A)	PRICE	CUSTOMIZATION DETAILS (OR N/A)