

## Order form for Autism Puzzle Piece

**Name:**

**Shipping Address:**

**Telephone Number:**

**Quantity:** x\$56 and add \$5 for shipping

**Subtotal: \$ .00**

**(Tax will be added once the order is received.)**

To pay with a **check**, please send the order form and an invoice will be sent to you that will include tax. Your order will then be placed, but will not be shipped until the check is received.

To pay with **Credit Card**, the shipping and billing address **must** be the same.

**Name as it appears on card:**

**Please select:**            **Visa**            **MasterCard**            **Discover**

**Credit Card Number:**

**Expiration date:**            **(month/year)**

**Security Code:**

(3-digit number on back of card for Visa, Discover, and MasterCard) \*\*All credit information will be shredded.