

Select-Your-Gift™ Order Form

2717 York Road
Oak Brook, IL 60523-2367
Office: 630-954-1287
Fax: 630-571-7110








Fill in quantity of Cards needed, by Level

| Gift Collection Name | Album Quantity | Your Price | Extended Total |
|---|----------------|------------|----------------|
| Level-03 Opal | | \$ 20 | |
| Level-04 Topaz | | \$ 28 | |
| Level-05 Pearl | | \$ 40 | |
| Level-06 Ruby | | \$ 60 | |
| Level-07 Emerald | | \$ 80 | |
| Level-08 Diamond | | \$ 120 | |
| Level-85 Pewter | | \$ 180 | |
| Level-09 Copper | | \$ 225 | |
| Level-10 Bronze | | \$ 338 | |
| Level-11 Silver | | \$ 450 | |
| Level-12 Gold | | \$ 675 | |
| Level-13 Platinum | | \$ 900 | |
| Gift Card Totals - - | | | |
| Sales Tax - (see note below) | | | |
| Shipping Charge: The actual cost of shipping award cards to you is added (Quantity: 1-100 = estimated: \$10 to \$15) | | | |
| (Min. Order - \$500) Order Total Amount - | | | |

Sales Tax will be billed on shipments into states where CAG is required to collect sales tax, unless a valid Sales Tax Exemption Certificate has been provided to CAG prior to placing your order, and is based on those states where tangible personal property is expected to be shipped into, not necessarily only your company location.

Select Theme for all spot award cards. (call for other options)

- Theme A: You're a Shining Star 
- Theme B: Thank You 
- Theme C: Congratulations 
- Theme D: Great Job 
- Theme E: Safety First 

Choose your Envelope Seals

- Thank You
- Congratulations
- A Gift for You
- Your Gift is Your Choice

To view all Spot Award Themes and Seals, visit:

www.Select-Your-Gift.com/Spot

| | |
|---------------------------------------|---|
| Contact Name: | PO #: |
| Organization: | Name: |
| Address: | PO Date: |
| City State: Zip: | <p>For assistance, Customized Orders, or Special Requirements, Please call 630-954-1287 or email: jkern@Select-Your-Gift.com</p> |
| Phone: Fax: | |
| Email: | |
| Special Instructions: | |

Provide any special or expedited shipping requirements.

Note: If your shipper number is provided we will bill that account.

Send your Order

| |
|--------------------------------|
| Requested Need-By Date: |
| Shipping Method |
| Shipper # (Optional) |

Click "Submit" (above) to email order, or "Print" and FAX your order to 630-571-7110

If this is your "First" order with Select-Your-Gift, please include the Credit Card payment form, or the Credit Application Form.

Please allow up to 5 business days to process order.