



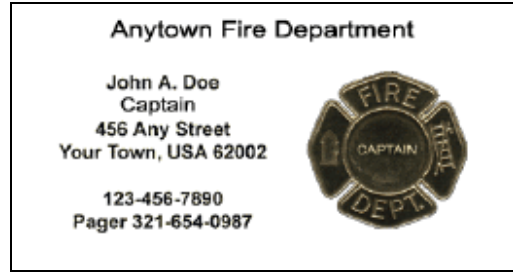
# FIRE DEPT. CUSTOM CARD

Business Card Order Form  
**Copy Craft Printers**  
A Division of McBride's Printing – Alton, IL



**Please  
Print or Type  
Exactly  
As it  
Should  
Appear!**

We do, however,  
Reserve the right  
To adjust your copy  
To our printing  
Specifications.



**Toll Free:**  
877- 609-0906  
or  
618- 467-0295  
or fax  
618- 467-0311  
for  
**Faster Service!**

[www.copcardstore.net](http://www.copcardstore.net)

Special Note:  
For your protection,  
We require proof of  
Employment unless  
Order is shipped to a  
Police facility

**Check one:**

- Gold Foil Embossed Badge on White Card Stock**
- SILVER Foil Embossed Badge on White Card Stock**

Your order for business cards will be individually printed using high quality metal plates and negatives, as a result, our standard production time is 15 to 20 working days. Thank you for your patience!

## FIRE DEPT. CUSTOM CARD

To Order: Review the sample card shown above and fill in this Personal information form with your data, using the sample as a guide. Print or type for each line as is appropriate. Blank lines will be omitted. Punctuation and Capitalization will be printed by how this form is prepared.

Complete the Payment & Shipping boxes and mail to:



Copy Craft Printers  
P.O. Box 3283  
Alton, IL 62002

Fax order for your convenience and faster service...  
Any deviation from the layout above could result in an additional charge. Please call us for any questions.

**Indicate here what you would like to be printed on the badge.**

Up to 3 lines of print can be put on badge:

1<sup>st</sup> line \_\_\_\_\_

Optional 2<sup>nd</sup> line \_\_\_\_\_

Optional 3<sup>rd</sup> line \_\_\_\_\_



1. \_\_\_\_\_  
(name)
2. \_\_\_\_\_  
(rank or title)
3. \_\_\_\_\_  
( district/division/etc.)
4. \_\_\_\_\_  
(address)
5. \_\_\_\_\_  
(city, state, zip)
6. \_\_\_\_\_  
(phone number, or fax)
7. \_\_\_\_\_  
(pager or email address)

Payment method	Pricing	Shipping Information																												
Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/>  Acct# _____ Exp. Date ____/____/____ Signature: _____	<table border="1"> <thead> <tr> <th>Item</th> <th>Price</th> <th>Qty</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>250 Cards @ .....</td> <td>\$58.00</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>500 Cards @ .....</td> <td>\$77.00</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Faxing or Mailing Proof.....</td> <td></td> <td></td> <td><b>\$7.50</b></td> </tr> <tr> <td>Shipping &amp; Handling.....</td> <td></td> <td></td> <td><b>\$7.00</b></td> </tr> <tr> <td colspan="3" style="text-align: right;">Total</td> <td></td> </tr> <tr> <td>Amount.....</td> <td></td> <td></td> <td>\$ _____</td> </tr> </tbody> </table>	Item	Price	Qty	Amount	250 Cards @ .....	\$58.00	_____	_____	500 Cards @ .....	\$77.00	_____	_____	Faxing or Mailing Proof.....			<b>\$7.50</b>	Shipping & Handling.....			<b>\$7.00</b>	Total				Amount.....			\$ _____	Name: _____  Address: _____  City: _____  State: _____ Zip Code _____  Phone Number: _____ <div style="text-align: right;">(required)</div>
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