Carriage House Samplings

Order Form

Fax it to 866 593-5829 (Toll Free)

Billing Information

Name (as it appears on card): _____

Street Address: _____

City: _____

State: _____ Zip: _____

Phone Number: ( ) -

Email: _____

Credit Card Information

Master Card ☐ Visa ☐

Card No.: ☐☐☐☐

Expiration Date: Month ☐ Year ☐

3-Digit Code: ☐ See website for information.

Shipping Information

(if different than Billing Information)

Name: _____

Street Address: _____

City: _____

State: _____ Zip: _____

Pattern Name	Price/Item	Quantity	Total Price
		Sub Total:	
		Shipping: $4.95 per order for Priority Mail For First Class – Price to be determined – Write in "1st Class" instead of dollar amount	
For Maryland Residents Only		**MD Sales Tax at 6%**:	
		Order Total:	