



SMALL ORDER FORM (100 mask or less)

Submitted by _____

Phone (Required) _____

Email _____

Shipping Address _____

How did you hear about us? _____

PAYMENT METHOD (Please select one)

PayPal Invoice Purchase Order # _____
 Email (if different from above) _____

Other (Please specify) _____ (If cash, please have exact change please)

Do not enter your credit card number. Major Credit Cards can be used with PayPal checkout.

DELIVERY OPTION (Please select one)

Shipping Service Shipping cost will be added to Invoice. EDMONTON pick up by customer 14720 115 Ave (780-452-4724) CALGARY pick up by customer 1115 55 Ave NE (403-275-3666)

OTHER, please specify _____

****DELIVERY DATE TO BE CONFIRMED ONCE ORDER IS PROCESSED AND COMPLETED****

| Category Name | Quantity (In increments of 5) | Unit Price | Amount |
|---------------|----------------------------------|------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

Subtotal _____

Special Request: _____

TAXES & SHIPPING will be added to final invoice.

Please email ORDER FORM to sales@bisonibi.ca

