

IRON COMPANY®

MAIL/FAX ORDER FORM

Mail or fax completed form with credit card information
or check/money order to the address below
IRON COMPANY®
2201 Long Prairie Rd. 107-373
Flower Mound, TX 75022
Fax 1-866-841-3875

QTY	ITEM #	ITEM NAME	PRICE	TOTAL

Subtotal:	
Shipping/handling*:	
TAX	
TOTAL AMOUNT:	

BILLING ADDRESS

FIRST NAME: _____ LAST NAME: _____
STREET ADDRESS: _____
ADDRESS LINE 2 (IF NECESSARY): _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE: _____ EMAIL: _____

SHIP TO (IF DIFFERENT)

FIRST NAME: _____ LAST NAME: _____
STREET ADDRESS: _____
ADDRESS LINE 2 (IF NECESSARY): _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE: _____ EMAIL: _____

CREDIT CARD INFORMATION (IF NOT ENCLOSING CHECK/MONEY ORDER)

Visa CARD#: _____ - _____ - _____
 MasterCard
 AmEx EXP DATE: ____ / ____ CVV#: _____ (3-digit number on back
 Discover of card or 4-digit number
on front for AmEx.)

SIGNATURE: _____

DATE: _____