



**\*\*U.S. ORDERS:**

**MUST BE COMPLETED\*\*** Federal Tax ID: \_\_\_\_\_ US orders tax exempt

### BUSINESS / BILLING INFO:

Contact Name: \_\_\_\_\_ Business Name: \_\_\_\_\_

Store Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SAMPLE KIT** Includes one of each standard size of tray\* 72.15 per kit Qty: \_\_\_\_\_

### ORDER DETAILS:

*(Items are listed by Length x Width x Depth)*

Item No.	Size (L x W x D)	Pcs per Case	Price per Pc	Price per Case	Case Qty Ordered	Case Sub Total
<b>Deep Square Serving Trays</b>						
<input type="checkbox"/> A09-030	7" x 7" x 2 <sup>7</sup> / <sub>8</sub> "	72 pcs	3.45	248.40	_____	_____
<input type="checkbox"/> A09-012	10 <sup>1</sup> / <sub>2</sub> " x 10 <sup>1</sup> / <sub>2</sub> " x 2 <sup>7</sup> / <sub>8</sub> "	26 pcs	4.60	119.60	_____	_____
<input type="checkbox"/> A09-011	11 <sup>7</sup> / <sub>8</sub> " x 11 <sup>7</sup> / <sub>8</sub> " x 2 <sup>7</sup> / <sub>8</sub> "	26 pcs	4.60	119.60	_____	_____
<input type="checkbox"/> A09-019	15 <sup>7</sup> / <sub>8</sub> " x 15 <sup>7</sup> / <sub>8</sub> " x 2 <sup>7</sup> / <sub>8</sub> "	13 pcs	6.80	88.40	_____	_____
<b>Shallow Square Serving Trays</b>						
<input type="checkbox"/> A09-013	10 <sup>1</sup> / <sub>2</sub> " x 10 <sup>1</sup> / <sub>2</sub> " x 1"	44 pcs	3.50	154.00	_____	_____
<input type="checkbox"/> A09-014	11 <sup>3</sup> / <sub>4</sub> " x 11 <sup>3</sup> / <sub>4</sub> " x 1"	44 pcs	3.65	160.60	_____	_____
<input type="checkbox"/> A09-015	15 <sup>3</sup> / <sub>4</sub> " x 15 <sup>3</sup> / <sub>4</sub> " x 1 <sup>1</sup> / <sub>4</sub> "	22 pcs	4.80	105.60	_____	_____
<b>Rectangular Serving Trays</b>						
<input type="checkbox"/> A09-016	14" x 10" x 1"	44 pcs	3.70	162.80	_____	_____
<input type="checkbox"/> A09-018	18" x 12" x 1 <sup>3</sup> / <sub>4</sub> "	22 pcs	5.70	125.40	_____	_____
<input type="checkbox"/> A09-020	21" x 14" x 1 <sup>3</sup> / <sub>4</sub> "	22 pcs	6.80	149.60	_____	_____
<b>Narrow Rectangular Serving Trays</b>						
<input type="checkbox"/> A09-017	18" x 7" x 1 <sup>1</sup> / <sub>4</sub> "	44 pcs	3.75	165.00	_____	_____
<input type="checkbox"/> A18-006 (MINI)	9" x 7" x 1 <sup>1</sup> / <sub>4</sub> "	44 pcs	3.15	138.60	_____	_____
<b>3-Ft Narrow Rectangular Serving Trays*</b> (NOT included in Sample Kit)						
<input type="checkbox"/> A16-180	36" x 5" x 0.625"	40 pcs	5.95	238.00	_____	_____
<b>Compartment Trays</b>						
<input type="checkbox"/> A11-CF1	10" x 10" x 2 <sup>7</sup> / <sub>8</sub> "	20 pcs	5.65	113.00	_____	_____
<b>Lidded Square Trays</b>						
<input type="checkbox"/> A16-181	9" x 9" x 1 <sup>3</sup> / <sub>4</sub> "	20 pcs	5.80	116.00	_____	_____
<input type="checkbox"/> LID-011	9 <sup>7</sup> / <sub>8</sub> " x 9 <sup>7</sup> / <sub>8</sub> " x 2 <sup>3</sup> / <sub>4</sub> "	16 pcs	7.80	124.80	_____	_____
<input type="checkbox"/> LID-019	13 <sup>3</sup> / <sub>4</sub> " x 13 <sup>3</sup> / <sub>4</sub> " x 2 <sup>3</sup> / <sub>4</sub> "	14 pcs	14.80	207.20	_____	_____
<input type="checkbox"/> LID-030	6 <sup>3</sup> / <sub>4</sub> " x 6 <sup>3</sup> / <sub>4</sub> " x 2 <sup>3</sup> / <sub>4</sub> "	36 pcs	4.80	172.80	_____	_____
<b>Ultra Deep Square Serving Trays</b>						
<input type="checkbox"/> A17-031	11 <sup>7</sup> / <sub>8</sub> " x 11 <sup>7</sup> / <sub>8</sub> " x 5"	26 pcs	6.45	167.70	_____	_____

Taxes: \_\_\_\_\_

**Order Total (Before Shipping):** \_\_\_\_\_

## wholesale wood serving trays order form

**PROMO CODE:** \_\_\_\_\_

**Order Total** (Before Shipping): \_\_\_\_\_

### SHIP TO (if different from Billing):

Contact Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Store Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### PAYMENT & OTHER TERMS:

- Full payment is required upon receipt of the order form. CCS will provide a shipping quote.
- **Prices Do Not include Shipping Charges & applicable taxes**
- Credit Cards:

### RETURN POLICY:

- Return Policy for Damaged Goods:  
*Please contact our office for return procedures*

I have read and agree to the Terms listed above. Please process the payments on the credit card listed below.

Signature: \_\_\_\_\_

VISA  Mastercard Expiry Date: \_\_\_\_\_

Security Card (See back of card):

Card Number:

Name on Card: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_