Order Form

Date: / /

For Office Use Only

C#_____ O#_____

Fed. I.D. No. 16-1553963 | OA2.10

Voss Signs®

Your Message. Your Way. When You Need It.

Toll Free: 1-800-473-0698
Phone: (315) 682-6418

Voss Signs, LLC • P.O. Box 553
Manlius, NY 13104

Fax: (315) 682-7335
Email: Sales@VossSigns.com

Office Hours: 8:00am - 4:30pm
Monday - Friday *(Leave a Message Any Time)*

Billing Address	
Attn:	
Company:	
Street:	
P.O. Box:	
City, State, Zip:	
Home Phone:	
Office Phone:	Fax:
Email:	

Shipping Address *(if different from billing)*
Attn:
Company:
Street:
P.O. Box:
City, State, Zip:
Phone:
Special Instructions:
Advise if: ☐ Residential ☐ Commercial

Qty	Item #	Description	Material	Color	Price Ea.	TOTAL

PAYMENT METHOD

Please include check or credit card information

☐ Check enclosed, Payable to **VOSS SIGNS, LLC**

☐ Charge GSA ____ VISA ____ MasterCard ____ DISCOVER ____

Acct # ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Exp. ___ /___

Print Cardholder Name

☐☐☐☐ 3 or 4 digit Security Code from card

Customer Signature *(Only on Credit Card Orders)*

Imprint Charge #1 _____
Imprint Charge #2 _____
Special Order Charge _____
*Shipping _____

**For all sign orders please add $20.00 flat rate shipping charge. For all accessory and non-standard sign items please call for shipping.*

Subtotal _____
New York State Sales Tax _____
TOTAL _____

IMPRINT INFORMATION

1. Quantity _____ Style # _____ Material _____ Color _____

2. Quantity _____ Style # _____ Material _____ Color _____