Goaley's Crafts Galore
Order Form

Name _____
Address _____
City _____ State___ Zip _____
Phone (___) ___ - _____

Send order form and payment to:

Goaley's Crafts Galore
312 North Shaw
Macon, Il 62544

Item Number _____ Qty _____ Price $ _____.__

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Total Quantity: _____

Payment Method:
Check or Money Order ___ Credit Card (Master Card or Visa Only) ___

Master Card: Account Number _____ Exp Date: _____
Visa: Account Number _____ Exp Date: _____

Total Purchase Price: _____.__
Shipping and handling:
($5.00 X Total Quantity _____.__

Total Remitted: _____.__

Thank You For Your Order