

Name: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_  
 Date: \_\_\_\_\_

Please fill out completely, then send to:

**Deluxe Plastic Card Company**

**Mail:** 202 South 22<sup>nd</sup> Street  
Suite 102  
Tampa FL 33605

**Fax:** (813)247-5112

**Email:** info@kwickcard.com

## Stock:

Type:

CR80 .030 mil       ROLO .020 mil       CDR  
 CR80 .015 mil       CR80KC       Other \_\_\_\_\_

Color:

<input type="checkbox"/> white	<input type="checkbox"/> tan	<input type="checkbox"/> medium blue	<input type="checkbox"/> clear
<input type="checkbox"/> gold	<input type="checkbox"/> red	<input type="checkbox"/> navy blue	<input type="checkbox"/> _____
<input type="checkbox"/> copper	<input type="checkbox"/> green	<input type="checkbox"/> orange	<input type="checkbox"/> _____
<input type="checkbox"/> silver	<input type="checkbox"/> grey	<input type="checkbox"/> yellow	<input type="checkbox"/> _____
<input type="checkbox"/> black	<input type="checkbox"/> light blue	<input type="checkbox"/> cranberry	<input type="checkbox"/> _____

## Description:

Quantities:

                

Front Imprint Colors:

Back Imprint Colors:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Description of Job:

Personalization/Misc: