

# Custom Picture Prints - Order Form

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## About You

First name	<input type="text"/>
Last name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
Zipcode+4	<input type="text"/>
Home Phone	<input type="text"/>
Work Phone	<input type="text"/>
Mobile Phone	<input type="text"/>
Preferred Phone	<input type="text"/>
Email Address	<input type="text"/>

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## About Your Designated Beneficiary Organization

Organization name	<input type="text"/>
Division or Chapter	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
Zipcode+4	<input type="text"/>
Contact Name	<input type="text"/>
Contact Phone	<input type="text"/>
Contact Title	<input type="text"/>
Contact Email	<input type="text"/>
Organization URL	<input type="text"/>

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### Your private web gallery

Event ID:

Username:

Password:

### Print my pictures

Borders

No Borders

Glossy Finish

Matte Finish

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

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**Please print all information neatly or simply fill out the form electronically.**

Mail completed forms with payment to: Images Move, PO Box 858, Burlington, MA 01803-5858

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## Credit Card Information (optional)

Card Type	<input type="text"/>	VISA
Card Number	<input type="text"/>	MasterCard or Discover
Expiration Date	<input type="text"/>	
Security Code	<input type="text"/>	3-digits on back of card

Name and address as they appear on the credit card.

Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
Zipcode+4	<input type="text"/>
Signature	<input type="text"/>

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# Custom Picture Prints - Order Form

Picture #	4"x6"		5"x7"		8"x10"		11"x14"		Total Cost \$ 0.00
	0	Cost	0	Cost	0	Cost	0	Cost	
1149									
1161									
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