Non-Profit Order Form — Two and Three-Footers (Seven-Footers require a separate form)

Instructions: Please print this form, make a copy of it on YOUR letterhead where this box now appears (fold this box under or cut it off) and fax it to us. If you don't have a fax machine, you can scan it or take a picture of it and email it as an attachment. Please print and use black ink in capital letters so it faxes clearly. We will create an invoice from this information. Credit cards cannot be used for floor models.

Please make your check payable and mail to:
Divnick International, Inc.
Attn: Wishing Well Order
321 Alexandersville Road
Miamisburg, OH 45342

Telephone: 1-937-384-0003
Fax: 1-801-820-3150
E-Mail: sales@divnick.com
Website: www.SpiralWishingWells.com

Purchase Order Number, if any _____ **Date** _____

Your Name (and title, if applicable) _____

Company Name (include store # if applicable) _____

Contact Person if other than you _____

Street Address _____
(Shipping to a residentially-zoned address adds $20 to the shipping)
City, State, Zip Code _____

Your Best Phone Number _____ **Fax Number** _____

Your Email address _____

Please enter different sizes on separate lines. Please inquire about current ProjectKindness Grant amounts.

Quantity	Size (2' or 3')	Commercial Price $1,995/ea (white funnels unless specified below)	Minus Project Kindness Grant	Other	Your Portion

If not white, specify funnel color(s), if any: _____ **+$100 each*** **= $**_____
(www.spiralwishingwells.com/details/colors.html) * + $200 if one of the bright sparkle colors

Vortx Toy Banks (not including Sign Toppers) Quantity of toys:___ **x $16 or $13.50 = $**_____
Toys retail for $29.95 plus $16 shipping. But if you have 1 floor-model Well, your toy cost drops to $16 each. If you are getting 2 Wells, the toys only cost $13.50 each. Shipping is FREE on up to 25 toys if ordered along with your Well(s). See www.spiralwishingwells.com/prices/free-toy.html to read how the toys can raise lots of additional revenue for you

Shipping (www.spiralwishingwells.com/prices/shipping.html) ..... = $ _____

Other _____ **= $**_____

Sub-Total ..... = $_____

Ohio Sales Tax (Submit tax-exempt verification, or add tax for your county rate)**..... = $**_____

Total Cost and Payment Amount ..... = $_____

Payment Method _____
(Check, Wire Transfer, Other -- Sorry, credit cards cannot be used for floor-model Wells, see Payment Terms)

My signature below confirms that the above-ordered Spiral Wishing Well(s) will only be used for non-profit organizations or projects, and that we will pay the above-total amount upon receipt of the invoice and shipping confirmation.

Authorized Signature _____

Title _____ **Date** _____

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