

Business Card Order Form



Please PRINT the following information as you want it to appear on your business card:

Name: _____

Position Title (such as Administrative Assistant): _____

District (Board of Education): _____

Mailing Address: _____

City: _____ Zip Code: _____

Telephone No.: _____ Fax No.: _____

Email Address: _____

I would like to order the following number of business cards (price includes shipping):

_____ Box(es) of 50 (\$6.00 per box)

_____ box(es) of 100 (\$12.00 @ box)

Payment directions (please check one):

Check has been mailed to KSBA (to address above)

Please invoice the District

P. O. # reference (optional) _____

Send order form to: Buffy Sams **Email:** buffy.sams@ksba.org **or Fax:** (502) 783-1194

Comments: _____

Sample Business Card Layout



Front



Back

Order received: _____

Order sent: _____