CrossCore
TRAINING SYSTEMS
CROSSCORE-USA.COM

Mail or fax completed form with credit card information
or check/money order to the address below

CrossCore, Inc.
1191 Huntington Drive #16
Duarte, CA 91010-2400
Fax 1-800-288-3047

# MAIL/FAX ORDER FORM

| QTY | ITEM # | ITEM NAME | PRICE | TOTAL |
|---|---|---|---|---|
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|---|---|
| **Subtotal:** | |
| **Shipping/handling*:** | |
| **CA TAX (9.75%):** | |
| **TOTAL AMOUNT:** | |

## BILLING ADDRESS

**FIRST NAME:** _____ **LAST NAME:** _____

**STREET ADDRESS:** _____

**ADDRESS LINE 2 (IF NECESSARY):** _____

**CITY:** _____ **STATE:** _____ **ZIP CODE:** _____

**PHONE:** _____ **EMAIL:** _____

## SHIP TO (IF DIFFERENT)

**FIRST NAME:** _____ **LAST NAME:** _____

**STREET ADDRESS:** _____

**ADDRESS LINE 2 (IF NECESSARY):** _____

**CITY:** _____ **STATE:** _____ **ZIP CODE:** _____

**PHONE:** _____ **EMAIL:** _____

## CREDIT CARD INFORMATION (IF NOT ENCLOSING CHECK/MONEY ORDER)

__ **Visa**
__ **MasterCard**
__ **AmEx**
__ **Discover**

**CARD#:** _____-_____-_____-_____

**EXP DATE:** _____ /_____

**CVV#:** _____ (3-digit number on back of card or 4-digit number on front for AmEx.)

**SIGNATURE:** _____ **DATE:** _____