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# FAX-EMAIL ORDER FORM

Please mail, scan/email, or fax the completed form.



**Mail Address:** PO Box 802217  
Dallas TX 75380  
**contact@roseco.com**  
**Phone:** 972.991.9731  
800.527.4490  
**Fax:** 972.404.9074  
800.874.9436

## ACCOUNT AND SHIPPING INFORMATION

Account Number:	P.O. Number:	Date:	
Business Name:	Contact Name:	Phone:	
Shipping Address (No PO Box):	City:	State:	Zip Code:
<b>FedEx Ship Method:</b>	Ground   2nd Day   Next Day P.M.   Next Day A.M.	<b>Local:</b>	Pick-Up Order   Same-Day Courier

## ORDER PAYMENT OPTIONS

<b>Payment Option:</b>	Bill My Net Account   C.O.D. Check   C.O.D. Cash (Money Order)   Credit Card - Fill Below with Credit Card Info:
Cardholder Name:	Credit Card Number:   Security Code:   Expiration Date:
Credit Card Billing Address:	City:   State:   Zip Code:
Your Business Name (If Listed on Card):	<b>Card Type:</b> Visa   MasterCard   American Express   Discover

SERIES OR SKU NUMBER	SIZE	METAL	QUANTITY	COMMENTS OR NOTES

<b>SPECIAL INSTRUCTIONS (IF ANY)</b>
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