FAX ORDER FORM

11865 SW 26 Street, Suite G7
Miami, FL 33175
Phone 305-552-7360 Fax 305-552-7361

www.CubanBoutique.com

DATE: _____

Bill To: (Please print clearly)

Name: _____

Address: _____
address city state zip

Phone: _____

Ship To:

Name: _____

Address: _____
address city state zip

Product ID	Description	Color	Size	Price	QTY	AMOUNT
						$ -
						$ -
						$ -
						$ -
						$ -
						$ -
						$ -
						$ -
						$ -
						$ -
					Total:	$ -

Office use only

(Florida Residence Only) Tax 7%:	$ -
Shipping:	
Grand Total:	$ -

Payment: *(Billing address must match credit card address)*

Payment Methood: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discovery ☐ Check

Name on credit Card: _____

Credit Card Number: _____ Expiration Date: _____ VID Code: _____

Fax your order to 305-397-2217

THANK YOU FOR YOUR BUSINESS