

Kyle LeBlanc Crawfish Farms

302 Saint Peter St., Raceland La 70394-2709

Phone: 985-226-6444

Fax: 985-537-4658

ORDER FORM

Name: _____

Delivery Address (include city, state & zip) or Airport Name/code if you know it for airport shipping: _____

Phone Nos. **(IMPORTANT!)**, most important ones to contact you: _____

Email Address to receive your tracking no. If no response received within **24 hours**, please call 985-226-6444. (May take longer on weekends) _____

Date You Want to Receive Products (please write out date and day to avoid errors). _____

If shipping to airport, please call the cargo section of your local airport to find out what hours they are open.

ORDER

Quantity	Product Description	Price	Amount
Lbs		\$	\$
Lbs		\$	\$
Lbs		\$	\$
Lbs		\$	\$
Lbs		\$	\$
Subtotal			\$
SHIPPING CHARGE: Enter shipping charges here. If airport shipping, leave blank. If shipping to your Federal Express or UPS account, leave blank and complete account no. below:			\$
<input type="checkbox"/> Federal Express Account No. _____			
<input type="checkbox"/> UPS Account No. _____			
TOTAL			\$

PAYMENT OPTIONS:

- Check or money order: Mail with this completed form to address above.
 - Credit Card: Complete this form and the section below and fax to 985-537-4658.
 - Mastercard** **VISA** **Discover** **American Express**
- *Mastercard, Visa, Discover preferred

Cardholder Signature: _____

Cardholder Name: _____

Expir. Date _____

Card No. _____

*Security Code _____

Full Billing Address (include city, state & zip): _____



*Mastercard/Visa/Discover security code is the last 3 numbers on the reverse of your card.



*Amex security code is the 4 small numbers printed just above your account no. on the front of the card.

Shipping Charge	\$	CONTINENTAL	DELTA	NORTHWEST	FEDEX
		UNITED	US AIR	SOUTHWEST	UPS
Tracking no.	<input type="checkbox"/> Tracking no. provided				