



NEW CUSTOMER / CATALOG REQUEST FORM

Fax completed form to Ellie Shoes at 714-771-0053.

** denotes required information

You **must** include a copy of your **business license and/or resellers permit** along with this form in order for your request to be processed. Thank you for your interest with Ellie Shoes!

CONTACT INFORMATION		
*Name (first / last)	*Title	*Company Name
*Billing Address		
*Shipping Address		
*City / State / Zip / Country		
*Phone	Alternate Phone	Fax
Website	Email Address	

* ORDER QUANTITY	
Printed Catalog Prospective Customers will receive a \$20.00 credit with their first purchase.	\$20.00
CD Image Library The CD Image Library is available to Current Customers only	\$10.00

CREDIT CARD BILLING INFORMATION		
* Card Type: <input type="checkbox"/> CHARGE CARD <input type="checkbox"/> ATM / DEBIT CARD		
*Credit Card #	*Expiration Date (MM/YY)	*CIV # (3 or 4 digit security code)
*Name on Card		
* Billing Street Address (if different than above)		
* Billing City / State / Zip / Country (if different than above)		
* Card Holder Signature		

Completed orders will be processed within 48 hours. If you have any questions, please call 714-771-0015 Thank You!