

# Shipping & Payment Info

# ORDER FORM

Please fill in as completely as possible. If you have questions, please call us!

# Luminous Views

**P.O. Box 12782**  
**San Diego CA 92112**  
**(619) 231-9061**  
[www.luminous-views.com](http://www.luminous-views.com)

## SHIPPING AND PAYMENT INFORMATION

### SHIPPING INSTRUCTIONS

PRIMARY SHIPPING ADDRESS	1	Contact Name: _____	<input type="radio"/> Commercial
		Company: _____	<input type="radio"/> Residential
		Address: _____	
		Address Line 2: _____	
		City/State/Zip: _____	
		Phone: _____	
		Notes: _____	
		Print Title: _____	
		_____ Canvas    _____ Photo	
		Size: _____	
	Deposit Amount: _____		
	_____ Framed    _____ Unframed		

*notes:*

### PAYMENT INFO    How are you paying for your order?

- Cash
- Credit Card
- Visa     MasterCard

Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_

Auth# on Back \_\_\_\_\_ Card Holder's Signature \_\_\_\_\_

### CREDIT CARD ADDRESS - IF DIFFERENT FROM PAGE 1

Name on Card: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Print Name: \_\_\_\_\_