



Print out this order form and mail it to:

saDOGList.com  
 11710 Parliament St. Suite 106  
 San Antonio, TX 78213

**Method of Payment:**

Money Order  Check  American Express  
 MasterCard  Visa  Discover

Credit card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature (Credit Card Only): \_\_\_\_\_ Date: \_\_\_\_\_

**Ship To:** (name and address)

**We do not ship to PO Boxes.**

Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

**Bill To:** (Please use the registered credit card address if using a credit card.)

Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Above information **must** match your issuing banks records for your credit card

**Your Order:**

Item Name	Desc, Size, Color	Quantity	Price Per Item	Total Cost

Subtotal \$ \_\_\_\_\_

Shipping (Calculate from saDOGList.com Shopping Cart) \$ \_\_\_\_\_

Tax (Calculate from saDOGList.com Shopping Cart) \$ \_\_\_\_\_

Total \$ \_\_\_\_\_