Clear All entries

Rev002

Supporting ***America's Volunteer Lifesavers®***

Same ship to address as Name and Address of person purchasing order?

Y ☐ N ☐

PRINT CLEARLY ALL ENTRIES BELOW

Name & Address of person purchasing order:
(If street address not indicated below then insert in ship to address)

Name (**For credit card purchases, must be as appears on card**)

Address/POB(**payments with credit card must use card billing address**)

City, State, Zip Code

Phone: Day ( ) ☐ Home ☐ Business

Phone: Evening ( ) ☐ Home ☐ Business

E-mail address:

Ship to address:
(Must contain street address for shipping items)

Name

Street Address Apt. No.

City, State, Zip Code

Delivery Telephone: ( )

Nat'l Staff Position (if applicable):

EMPLID # (Required): **District-Region/Division/Flotilla #** (Required): |_____/_____/_____|

Item No:	Quantity:	Description:	Cost:	Total:

NOTE: QUANTITIES LIMITED ON CERTAIN ITEMS – NO BACK ORDERS

Method of Payment:

☐ MasterCard ☐ VISA ☐ Check or Money Order (No cash)
Payable to: **CGAuxA, Inc.**

Expiration Date: |___/___| Validation No: |_____|
MO. YR. (REQUIRED – last 3-digits number near signature block Reverse side of credit card)

Total of Order:

Shipping Costs:

Out CONUS fee:
(if applicable)

TOTAL AMOUNT:

Signature:

Order by MAIL TO:
Coast Guard Auxiliary Center
9449 Watson Industrial Park
St. Louis, MO 63126-1522
Credit Card Order by FAX TO: **(314) 962-6804**
Voice: (314) 962-8828

☐ Out CONUS add $10.00
(HI/AK/PR/GU)

☐ Pick-up at AUXCEN

Shipping Chart:

Order Value:	Rate:
Up to $35	$ 6.50
$35.01 to $70.00	$ 8.95
$70.01 to $105.00	$10.95
$105.01 to $140.00	$12.95
Over $140.00	$13.95

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COPY 1 - AUXCEN

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PRINT ...