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CONCORD, CALIFORNIA 94518
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FUNDRAISER

PRODUCT ORDER FORM

• Incomplete or unclear order forms may not be processed.
Boresha International, Inc. is not responsible for errors due to illegibility or misinterpretation of handwritten form information.

CUSTOMER INFORMATION

CUSTOMER NAME (LAST, FIRST, MIDDLE)			
STREET ADDRESS			
CITY	STATE	ZIP CODE	
PHONE	CELL PHONE		
EMAIL			

SHIPPING INFORMATION (IF DIFFERENT)

CUSTOMER NAME (LAST, FIRST, MIDDLE)			
STREET ADDRESS			
CITY	STATE	ZIP CODE	
PHONE	CELL PHONE		

ORGANIZATION INFORMATION

ORGANIZATION NAME	ORGANIZATION ID NUMBER
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BORESHA PRIVATE ESTATES

	PRICE	SHIPPING RATE	QUANTITY (# of 12 oz. bags)	TOTAL # OF BAGS	TOTAL
INDIVIDUAL 12 OZ. BAGS	\$19.95	INCLUDED!	____ Ethiopia (ground) ____ Uganda (ground) ____ Tanzania (ground) ____ African Decaf (ground)		

LIBERATO

	PRICE	SHIPPING RATE	QUANTITY (Total # of five - 1 oz. bag sets)	TOTAL
BSKINNY COFFEE five - 1.0 oz bags	\$19.95	INCLUDED!		

ORDER TOTAL

MONTHLY AUTOMATIC SHIPPING PLAN

I hereby request and authorize Boresha International, Inc. to ship my order, according to my selected purchase plan, directly to me every month and collect the \$ _____ (includes shipping) payment each month from my checking account or credit card.

INITIAL _____

METHOD OF PAYMENT

<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Amex <input type="checkbox"/> Discover <input type="checkbox"/> Check* <i>(If ordering for Auto Ship by check, include Monthly Auto Ship Check Authorization Form)</i>	
CARD NUMBER	EXP. DATE
NAME ON CARD	C.V.V. NUMBER
BILLING ADDRESS	
CITY	STATE ZIP
SIGNATURE OF CARD HOLDER	DATE

*Please make Money Orders and Checks payable to: Boresha International, Inc.

FOR OFFICE USE ONLY:	Received _____	Check No. _____
Shipped via _____	Shipped _____	Filled by _____