

American Icon Autographs: Mail-In Order Form

Customer

Name: _____

Phone

Number: _____

Mailing Address (to return

items): _____

Number of items mailed in: ____ Event Name and Event

Date: _____

Item # 1 Description: _____ PSA/DNA for \$10 (Circle One): YES / NO

Item # 1 (To be signed by): _____

Item # 1 Inscription / Notes: _____

Item # 2 Description: _____ PSA/DNA for \$10 (Circle One): YES / NO

Item # 2 (To be signed by): _____

Item # 2 Inscription / Notes: _____

Item # 3 Description: _____ PSA/DNA for \$10 (Circle One): YES / NO

Item # 3 (To be signed by): _____

Item # 3 Inscription / Notes: _____

Item # 4 Description: _____ PSA/DNA for \$10 (Circle One): YES / NO

Item # 4 (To be signed by): _____

Item # 4 Inscription / Notes: _____

Item # 5 Description: _____ PSA/DNA for \$10 (Circle One): YES / NO

Item # 5 (To be signed by): _____

Item # 5 Inscription / Notes: _____

Total Number of Autographs for all items: _____ Total Number of Inscriptions for all items: _____

Total Amount due (Including return shipping): _____

*3 Payment Options: Paypal OR Check/Money Order OR We'll call you to collect Credit or Debit card info.

Paypal Name: _____ Date posted: _____

Check or Money Order Number: _____

FOR OFFICE USE ONLY:

Order #: _____ PAID: _____ Order Completed and Sent back on: _____