PLEASE CUT ALONG DOTTED LINE

Page # _____

 SPIRITUAL EXPRESSIONS

Customer Number _____ Order Date / /

New Address ☐ New Customer ☐ DATE REQUIRED / /

Teacher / Buyer / Director Name _____

Department / Team / Group Name _____

Phone # (____) _____ Home Phone # (____) _____

Fax # (____) _____ Email Address _____

BILL TO

Organization Name _____

C/O _____

Address _____

City _____ State _____ Zip _____

SHIP TO

Organization Name _____

C/O _____

Address _____

City _____ State _____ Zip _____

SPIRITUAL EXPRESSIONS™
WORSHIP DANCEWEAR

6750 MANCHESTER AVENUE
ST. LOUIS, MO 63139
ST. LOUIS: 314-754-1945
CALL TOLL FREE: 1-888-776-5533
FAX TOLL FREE: 1-877-773-5175
Email: info@spiritualexpressions.com

www.SpiritualExpressions.com

ACCOUNT NUMBER (All digits, please) Expiration Date

☐ VISA ☐ MASTERCARD ☐ DISCOVER

☐ AMERICAN EXPRESS *CVV2

* Last 3 digit number printed on the back of Visa, Mastercard and Discover cards; or the 4 digit number on the front right of American Express cards.

Signature _____
(Required for charge orders only)

Printed Name _____

Total this page	
Total other side	
SUBTOTAL	
8.491% Missouri Sales Tax (MO Residents Only)	
Shipping Charge (See next page)	
If Order is C.O.D. Add $10.00	
Previous Balance or Credit Invoice No.	
GRAND TOTAL	

Fill in complete Style Number, Description, Size and Color.

STYLE NUMBER	STYLE NAME	COLOR	SIZES - QUANTITY	UNIT PRICE	TOTAL

SUBTOTAL