

# Eastern Connecticut Balloon Services, Inc.

## HELIUM PRODUCTS ORDER FORM

(1) Fill out and fax this order form to (860) 376-5101  
or (2) Call us directly to place your order (860) 376-5807  
or (3) Mail completed order form to: Eastern Connecticut  
Balloon Services, P O Box 628, Jewett City, CT 06351

Name \_\_\_\_\_  
Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Country \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Fax (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### ARTWORK/LETTERING SPECS

\* E-mail artwork/lettering to:  
gerard@easternCTballoon.com  
--OR--  
\* Fax artwork/lettering to:  
860-376-5101  
Please call 860-376-5807  
if you have any questions.

Ship to: (if different)  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

PO# \_\_\_\_\_ ORDER DATE \_\_\_\_\_ DATE NEEDED, if critical \_\_\_\_\_

ITEM DESCRIPTION (include shape, color(s), size) Do you need a filling hose with this order?	QTY	PRICE EACH	TOTAL
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Ship via: UPS ground \_\_\_ 3rd day \_\_\_ 2nd day \_\_\_ next day \_\_\_

**We will fax you your invoice with the total, including shipping.  
Please check it over carefully, sign it, and fax it back to us. Thanks for your order!**

### PAYMENT METHOD:

Check/Money Order \_\_\_ VISA \_\_\_ MasterCard \_\_\_ Discover \_\_\_  
Name on Card \_\_\_\_\_ Card # \_\_\_\_\_ Exp Date \_\_\_\_\_  
There is a \$20 charge for each returned check. 3-digit CVV code \_\_\_\_\_ (on back of card)

Comments, special instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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