

Petlane Bottomless-Bag Order Form

Customer: _____
Name Telephone

Pet Advisor: _____
Name PA Number

Shipping Address: _____
(No Post Office Boxes) Street City State Zip

I hereby authorize Petlane to debit my credit card to pay for my Bottomless-Bag pet food program. I may cancel this program at any time by notifying Petlane by e-mail, facsimile, in writing or by telephone. Petlane will discontinue the service within 72 hours of receiving said notice. I understand Petlane will begin billing my credit card on the first day my pet food order is processed. Each time a subsequent shipment is sent, my credit card will automatically be billed according to the shipping plan requested.

Please provide credit card information for monthly billing

CC Number: _____ Exp. Date: _____ Security Code: _____
Month/Year On back of card

Billing Address: _____
(If different from shipping) Street City State Zip

Cardholder Name: _____ E-Mail: _____
Please Print

Item #	Description	Ship Plan	Qty	Price	Price
3803A	Pure Woof – Puppy/Active Dogs (15 lb)			26.49	
3806A	Pure Woof – Puppy/Active Dogs (30 lb)			39.99	
3801A	Pure Woof – Adult (8 lb)			15.99	
3804A	Pure Woof – Adult (15 lb)			27.49	
3807A	Pure Woof – Adult (30 lb)			39.99	
3805A	Pure Woof – Light/Senior (15 lb)			25.49	
3808A	Pure Woof – Light/Senior (30 lb)			38.99	
7800A	Pure Purr – Indoor Cat (8 lb)			17.99	
7802A	Pure Purr – Indoor Cat (15 lb)			27.99	

Ship Plan	
25 Days	A
30 Days	B
45 Days	C

Shipping	
8 lb Bag	\$ 5.44
15 lb Bag	\$ 7.11
30 lb Bag	\$10.64

Total Purchased	\$
FOR ID, IL, MA, NJ, OK & WY ONLY, calculate tax here (before S&H): _____%	\$
Subtotal	\$
For All Other States calculate TAX on Subtotal : _____%	\$
Grand Total	\$

Signature: _____ Date: _____

Enhancing the lives of pets and their people.

Mailing Address: 2291 Via De Mercados, Suite E
 Concord, CA 94520

Phone: 925-264-7766 Fax: 925-264-7781 www.petlane.com
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