



# Wild Angel Cozy Company LLC Product Order Form

This form is for our authorized resellers only. If you are interested in becoming a reseller of our products, please visit [www.wildangelcozy.com](http://www.wildangelcozy.com) and download a Reseller Application.

## COMPANY INFORMATION

RESELLER STORE NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

SHIPPING ADDRESS \_\_\_\_\_  
\_\_\_\_\_

## ORDER DETAILS

PURCHASE ORDER # \_\_\_\_\_ (optional)

ORDER DATE \_\_\_\_\_ (mm/dd/yyyy)

REQUESTED SHIP DATE \_\_\_\_\_ (mm/dd/yyyy)

Please enter quantities of your order below:

**5 GALLON COZY:**

- \_\_\_ BLACK
- \_\_\_ RED
- \_\_\_ KELLY GREEN
- \_\_\_ PURPLE
- \_\_\_ PINK
- \_\_\_ WINE

**2.5 GALLON COZY:**

- \_\_\_ KELLY GREEN
- \_\_\_ NAVY BLUE
- \_\_\_ BLACK

**70 QUART MUCK BUCKET COZY:**

- \_\_\_ BLACK W/ BLACK TOP
- \_\_\_ BLACK W/ ULTRA BLUE TOP

**CREDIT CARD AUTHORIZATION**

NAME ON CARD \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

\_\_\_\_\_

CREDIT CARD TYPE \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_

CARD CV2 # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ (mm/dd/yyyy)

I \_\_\_\_\_ authorize the Wild Angel Cozy LLC company to charge my credit card.  
(PRINT NAME)

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**FAX OR MAIL TO:**

Fax: (603) 672-3506

Wild Angel Cozy Company LLC  
54 Chestnut Hill Rd  
Amherst NH 03031

Phone: (603) 249-6727  
info@wildangelcozy.com

DO NOT WRITE BELOW. COMPANY USE ONLY.

NOTES:  
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