

Enhanced Listing Scovie Awards Order Form

(Make Photocopies of This Form If Necessary)

Company Name _____

Contact Name _____

Phone _____ Email _____

Scovie Enhanced Listings (Send all product images to emily@fiery-foods.com)

Product #1:

Product Name _____

Category Entered _____ Subcategory Entered _____

50 words of copy (Enter here or send via email to emily@fiery-foods.com)

Product #2:

Product Name _____

Category Entered _____ Subcategory Entered _____

50 words of copy (Enter here or send via email to emily@fiery-foods.com)

Product #3:

Product Name _____

Category Entered _____ Subcategory Entered _____

50 words of copy (Enter here or send via email to emily@fiery-foods.com)

Payment Information

Total Number of Enhanced Listings Ordered _____ **@ \$25 each for first 3. \$20 for each additional=\$** _____

Total Amount Due \$ _____

If Paying via PayPal, pay to chile@fiery-foods.com

Credit/Debit Card Information

CC# _____

Exp. _____ 3-digit CVV# _____ Billing Zip Code _____

Name on Card _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____

Fax Completed Order Form to Emily DeWitt-Cisneros 505-508-3196 or

Email to emily@fiery-foods.com.