



Buddy Walk® Coffee Order Form

Local Buddy Walk® Information:

Contact name _____

Contact email _____

Contact phone number _____

Organization Name _____

Shipping street address _____

City, state and zip _____

Walk Date _____

Billing Information (if different):

Billing contact _____

Billing address _____

City, state and zip _____

Order Information:

Regular coffee number of pounds:

Whole bean _____ Ground _____

Decaf coffee number of pounds:

Whole bean _____ Ground _____



Payment options:

Invoice (1% 10, net 30)

Credit card Visa MasterCard Discover AmEx CW _____

Name on card _____

Card Number _____ Exp. date ____ \ ____

Please email your order to dave@furnacehillscoffee.com