

Steak Knives Order Form

Steak Knife Set	# of sets									
Total # of sets BILLING INFO Full Name	#	_(\$100 pe	r set, plus	tax at 11.5	% and \$	10 per set for	packagi	ng + cost	t of ship	ping)
Address Line 1										
Address Line 2										
City			State		ZIP_					
Phone Number	()	-		FAX <u>(</u>)	-				
Name on Card										
Card Type	VISA	M/C	AMEX	DISC	Exp_					
Card Number		-	-		CSC_					
Signature						Date				
SHIPPING INFO Full Name										
Address Line 1										
Address Line 2										
City			State		ZIP_					
Phone Number	()	-								
Special Notes										
Shipping #:	Fed Ex			UPS _						

I authorize my credit card to be charged for the above amount.

Please FAX or EMAIL completed form to Anna or Emma-Jane at (312) 624-9521 or anna.dawson@chicagocutsteakhouse.com or emmajane.barclay@chicagocutsteakhouse.com