OWS Fulfillment Order Form

Recipent Information:

Name: _____
Business Name: _____
Address: _____
Address: _____
City, State, Zip: _____
Phone Number: _____
Email Address: _____

Requested Ship Date: _____
Invoice/Reference Number: _____

Winery Information:

Shipping Winery: _____
Winery Phone: _____
Winery Email: _____

Product Information:

# of Cases	# of Bottles	Product Description	Product Code	Size

Select One:

- ○ By checking the box, I acknowledge I have a DTC Permit for this state
- ○ Distributor Shipment Through Fulfillment ⇨ Distributor License # Required: _____
- ○ Distributor Sample ⇨ Distributor License and Licensed Address Required: _____
- ○ On-site Purchase (DE - OK - RI)
- ○ Open State (FL - MN - DC) (AK - unless onsite purchase)

Packaging Options:

- ○ Pulp
- ○ Styrofoam ($1.50 Surcharge)

Carrier Options:

- ○ FedEx
- ○ UPS

Shipping Options:

- ○ Ground
- ○ Express Saver 3-Day
- ○ 2nd Day
- ○ Standard Overnight
- ○ Priority Overnight

Special Instructions / Gift Card:

_____
_____
_____