

Submission:

Date:

Name:

Phone:

Email:

Address:

City/State/Zip:



	QTY	YEAR	BRAND	CARD #	PLAYER NAME	ATTRIBUTES SERIAL NUMBER	DECLARED VALUE	SERVICE LEVEL	GRADING FEE	OFFICE USE
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										

					Total Items					
					Additional Fees					
					Shipping Fees					
					Total					

Customer:	The Shoppe:
Date:	Date: