

**Lehigh Valley Mall  
Kravco Simon Giftcard-Corporate Order Form**

Payment options for orders: (a) ACH (b) Corporate Credit Card (c) Corporate Check (upon approval) (d) Cash

Credit Cards Accepted: Visa, MasterCard, Discover, American Express

*Thank you for choosing the Simon Giftcard that can be used anywhere Visa Debit Cards are accepted. Please see the fee schedule below for an additional charge to be included with your order. Simon Giftcards expire in a minimum of twenty months from date of purchase and beginning in the 13th month after issuance a service fee of \$2.50 per month will be deducted from the card balance until the value reaches \$0. There is a \$5.00 fee to replace a lost or stolen Giftcard and a \$15 fee to replace an expired Giftcard. Therefore, we recommend that you purchase cards monthly or quarterly. Please read the complete Terms and Conditions and Frequently Asked Questions enclosed. Please verify receipt of both items and acceptance of the Terms and Conditions by signing where indicated below. SIMON GIFTCARDS ARE NONREFUNDABLE AND MAY NOT BE EXCHANGED FOR CASH OR CREDIT.*

*I have read and agree to the enclosed Simon Giftcard Terms and Conditions.*

Signature (Required for order processing)

Title

**Corporate Order / Billing Information**

Company Name

Street Address (No PO or APO Boxes, please)

Billing Address (If different than street address)

City

State

Zip Code

Phone

Fax

Contact Name and Telephone Number

Date Order Needed

Mall Location for Order Fulfillment and Pickup

Telephone # to Verify Funds

**Simon Giftcards**

(Giftcards - Minimum Value Load \$20 - Maximum Value Load \$500)

Denomination

Quantity

Totals

		=	\$
		=	\$
		=	\$
	Handling Fee	=	\$
	Total Amount Paid	=	\$

Handling Fee Schedule	
# of Cards	Fee Per Card
1-24	\$2.00 per card
25-99	\$1.50 per card
100-249	\$1.00 per card
250-499	\$0.75 per card
500+	\$0.50 per card

**Order Pick Up Information**

I verify that I have received in full the entire Giftcard purchase as outlined on this Corporate Order Form.

Corporate Representative Signature

Home Office/Mall Employee Signature

Corporate Representative Name (Printed)

Home Office/Mall Employee Name (Printed)

Date Picked Up