



ORDER FORM “Thor’s Favorites: Potato Lefse”

	Quantity	Cost	Subtotal
DVD		\$24.99	\$
Lefse Stick		\$11.99	\$
Shipping & Handling		\$2.00 (per item)	\$
Tax (ND residents only)		5%	\$
		Total	\$

I have enclosed a check for \$ _____, payable to **“Thor’s Ethnic Foods.”**

Please bill my credit card:

Kind of card: VISA Master Card Discover

Name on card: _____

Card number: _____

Expiration date: _____ CVC code*: _____

*(The CVC code is the last three digits on the back of your credit card.)

Signature: _____

Mail payment and completed form to: Liz Gjellstad, 1000 20th Ave. NW Unit B5, Minot, ND 58703

Billing Address:

Name: _____

Address: _____

City: _____

State & Zip: _____

Telephone: _____

E-mail: _____

Check here if Billing Address and Shipping Address are the same.

Shipping Address:

Name: _____

Address: _____

City: _____

State & Zip: _____

Telephone: _____