



C-Store Merchandiser Order Form

Fax completed form to 507-567-2413

SNACK MERCHANDISERS	Item #	Unit Price	Regular	Overnight	Number Requested
			Shipping	Shipping	
5 Shelf Floor Snack/Cereal Rack	55173	\$70.00	\$26.00	\$194.00	
4 Shelf Counter Snack/Cereal Rack	55174	\$50.00	\$14.00	\$120.00	
3 Shelf Counter Snack/Cereal Rack	55175	\$41.00	\$10.00	\$92.00	
Red Single Strand Hanging Clip Rack	13965	\$75.00	\$13.95	\$69.75	
6 ct. CIAC Cooler Door Rack	19078	\$36.32	\$6.17	\$30.85	
4-Peg 3 oz Counter Snack Display	19320	\$22.40	\$6.82	\$34.10	
Gondola Rise Hook Kits	19321	\$39.44	\$8.54	\$42.70	
6 ct. CIAC Vertical Cooler Door Display	20830	\$27.75	\$6.17	\$30.85	
6-Peg 3 oz Counter Snack Display	28759	\$23.30	\$6.82	\$34.10	
Kashi 12ct Stackable Counter Display	36203	\$16.57	\$7.13	\$35.65	
36" 2 Shelf Gondola Display Module	81035	\$25.64	\$16.88	\$84.40	
36" Shelf Extender Kit - Extra (top)	81036	\$19.50	\$7.56	\$37.80	
48" 2 Shelf Gondola Display Module	81037	\$53.56	\$21.94	\$109.70	
48" Shelf Extender Kit	81038	\$56.01	\$8.12	\$40.60	
12.5" White Counter Display (stackable)	89906	\$21.67	\$6.82	\$34.10	
Special K Shake Cooler Door Rack	58653	\$12.00	\$4.00	\$20.00	
48 Ct CIAC Floor Rack	57392	\$39.32	\$5.50	\$50.00	
CIAC Counter Rack	55241	\$36.00	\$8.00	\$70.00	
CIAC Floor Rack	55242	\$42.00	\$8.00	\$107.00	
Kashi Merchandiser	3010	\$85.00	\$20.00	\$90.00	
Pringles Extreme 40g Pegboard Extender	0130-3012	\$12.00	\$5.38	\$39.87	
Pringles 3-Tier Gravity Feed Rack	0130-3088	\$27.00	\$6.43	\$55.54	
Pringles 74G 4-Shelf Sidekick Wire Rack	0130-3005	\$35.00	\$6.43	\$55.54	
Pringles 74G Gravity Feed Dispenser w/straps	0130-3008	\$15.00	\$5.38	\$39.87	
Pringles 2' Red Gravity Feed Shelf	0130-3196	\$10.00	\$5.96	\$46.27	
Pringles 3' Red Gravity Feed Shelf	0130-3197	\$15.00	\$6.43	\$55.54	
Pringles 2' Beige Gravity Feed Shelf	0130-3186	\$10.00	\$5.96	\$46.27	
Pringles 3' Beige Gravity Feed Shelf	0130-3187	\$15.00	\$6.43	\$55.54	

Freight costs are estimates based on average shipping prices in the continental U.S. and Canada

Please include the following information:

Retailer Name: _____

Contact Name: _____ Title: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email Address: _____

Wholesaler: _____ Wholesaler City: _____

Shipping Method Standard Other (please Specify) _____

Payment Method: Check Operator Master Card Operator Visa American Express

Credit Card Number: _____ Expiration Date: ____ / ____ / ____

Name on Card: _____

Billing Address: _____ City: _____ St: _____ Zip: _____

Signature: _____ Date: ____ / ____ / ____