



ECG SUBMISSION FORM

315B RANCHO BUENO DR.
 GEORGETOWN, TEXAS 78628

"GRADING THE GAME"

SHIP TO:		<input type="checkbox"/> Residential	<input type="checkbox"/> Business
Name:			
Address:			
City:			
State:		Zip:	
Phone:			
E-mail:			
Important for customer notification			

FOR OFFICE USE ONLY	
Invoice #:	
Job #:	
Date Received:	
Rec 'd By:	
Check In Rep:	

#	Type	Qty.	Year	Set Name (Topps, Upper Deck, Etc.)	CARD #	CARD/PLAYER NAME	SUBGRADES Y/N orders under 100
1							
2							
3							
4							
5							
6							
7							
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21							
22							
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24							
25							

IF YOU NEED MORE SPACE (PRINT PAGE 2 AS NEEDED)

*****ALL BULK ORDERS OF 100+ WILL BE A MINIMUM OF 90 DAYS*****
 NO SUBS ON 100+ BULK ORDERS

I have read and agree to the ECG terms and conditions listed here and on www.elitecardgrading.com/grading

Signature _____ Date: _____

