



Collector's Grade  
 6421 North Florida Avenue,  
 Ste D UNIT #294  
 Tampa, Florida 33604

Name: \_\_\_\_\_

Address: \_\_\_\_\_

add'l address info (Apt,building,etc: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

CG Group # \_\_\_\_\_ - CG Member # \_\_\_\_\_ CG545 \_\_\_\_\_ (Discount Code)

**Payment Details:**

PayPal Invoice: Email: \_\_\_\_\_ PLEASE PRINT LEGIBLY

**Note:** (All CG correspondence WILL be sent to this email address)

**Return shipping and Insurance:**

- Return shipping: USPS Med Flat Rate per 50 cards at time of delivery
- Return insurance is required a minimum charge of \$19.70 will be added automatically for the first \$500 in declared value! Add an additional \$9.00 per \$500 in declared value thereafter.

**Select your service level:**

- 1. \_\_\_ Grading & Encapsulation: 1-25 cards \$10 - 26-50 cards \$8
- 2. \_\_\_ Collect & Protect: \$7.00 per, slab style CG \_\_\_ PSA \_\_\_
- 3. \_\_\_ Group Submission: \$5.00 per card 50 card per submissions

**Submission Details:**

Total # Cards \_\_\_\_\_ Wax/Foil Pks \_\_\_\_\_

Service Level fee \$ \_\_\_\_\_ **Ex: level 1 - 1-25 card sub - Enter \$10**

Pack Grading fee \$ \_\_\_\_\_ Add \$3 per pack to your selected service level

Grading fee Total \$ \_\_\_\_\_

Declared Value \$ \_\_\_\_\_

Return Insurance \$19.70 for the first \$500 in declared value

Add'l Insurance \$ \_\_\_\_\_ (\$9.00 each additional \$500 in declared Value)

Return Shipping \$14.75 (1-50 card submission or 25 Pks USPS medium flat rate

International S/H \$ \_\_\_\_\_ (1-50 cards \$45.00)

TOTAL DUE: \$ \_\_\_\_\_ (add Grading fee total + Shipping/Insurance rates)





