

Free Sample Pack of Cigarettes

Please complete this form and provide a readable photocopy of your picture ID verifying your age is over 21.
Cigarettes samples WILL NOT be sent without complete information and copy of ID.

NAME _____ PHONE _____
 ADDRESS _____ FAX _____
 _____ E-MAIL _____
 CITY _____ STATE _____ ZIP _____

FEATURE BRAND SAMPLES

Please Circle Your Selection Carefully

Brand	Size	Pack	Style	Price
Bronco	King	Soft Pack	FF/LT/UL/MT/ML/NF	\$15.49
	100	Soft Pack	FF/LT/UL/MT/ML	
Seneca	King	Soft Pack	FF/LT/UL/MT/ML/NF	\$11.49
	100	Soft Pack	FF/LT/UL/MT/ML/ULM	
GT One	King	Soft Pack	FF/LT/UL/MT/ML/NF	\$15.49
	100	Soft Pack	FF/LT/UL/MT/ML	
Opal	120's	Box	FF/LT/UL/MT/ML	\$15.99
Desert Sun	King	Soft Pack	FF/LT/UL/MT/ML/NF	\$11.49
	100	Soft Pack	FF/LT/UL/MT/ML	
Unify	King	Soft Pack	FF/LT/UL/MT/ML/NF	\$11.49
	100	Soft Pack	FF/LT/UL/MT/ML	
Niagara	King	Soft Pack	FF/LT/MT/ML/UL	\$11.49
	100	Soft Pack	FF/LT/UL/MT/ML	
Kentucky's Best	King	Soft Pack	FF/LT/UL/MT/ML/NF	\$14.99
	100	Soft Pack	FF/LT/UL/MT/ML	
Tucson	King	Soft Pack	FF/LT/UL/MT/ML/NF/XM	\$12.49
	100	Soft Pack	FF/LT/UL/MT/ML	
Kingsley	King	Soft Pack	FF/LT/UL/MT/ML	\$10.99
	100	Soft Pack	FF/LT/UL/MT/ML	

FF=Full Flavor LT= Light UL=Ultra Light ULM=Ultra Light Menthol MT=Menthol ML=Menthol Light MED=Medium NF=Non-Filter XM=Extra Menthol

Please choose your sample by brand and flavor or we can select a sample for you based on what you are currently smoking.

PLEASE TAKE OUR SURVEY

How did you hear about OTDirect?

___ CLASSIFIED ___ INTERNET
 ___ MAGAZINE ___ FRIEND ___ OTHER

What is most important to you?

___ FLAVOR ___ PRICE ___ BOTH

Have you purchased cigarettes over the internet or through the mail before?

___ YES ___ NO

If yes, when was the last time?

___ 1 WEEK ___ 1 MONTH
 ___ 3 MONTHS ___ 6 MONTHS

What is your usual brand and style?

BRAND _____
 FLAVOR _____ KING OR 100'S

Please mail or FAX this request and copy of ID to:

OrderSmokesDirect – Sovereign Seneca Territory via

P.O. Box 150 – Salamanca, NY 14779

FAX: 1-866-897-5890

To Order Your Favorite Brand Today Call:

1-866-215-1069

Please send me the sample I have chosen above or select one for me. My signature below certifies that I am over the age of 21 and have included proof of such with this request.

Signature _____ Date _____ DOB _____

BE SURE TO INCLUDE YOUR PHOTO ID

If you have any questions, Please contact the person that gave you this form:

Name _____ Phone _____ Ref# _____

E-mail _____

If you know anyone who would like a sample, please photocopy this and pass it along! Over 21 ONLY!