JEWELSCENT

ORDER FORM

CUSTOMER NAME: _____ PHONE #: _____

EMAIL ADDRESS: _____

ITEM	SCENT	PRICE

SUBTOTAL	
SALES TAX	
SHIPPING & HANDLING	
TOTAL	

I ACCEPT: VISA   MC   DISC   AMEXP   PAYPAL   VEMO

CARD #: _____ EXP DATE: _____

3 DIGIT CODE: _____ BILLING ZIP CODE: _____

CUSTOMER SIGNATURE: _____

THANK YOU FOR YOUR BUSINESS!