Order Form Fax to: (484) 430-3020

Brooke Jaron 191 Presidential Blvd #504 Bala Cynwyd, PA 19004 e-mail: brooke@brookejaron.com

Customer Information				
Name:	Date:			
Company:	Phone:			
Shipping Address:	Email:			
City, State, Zip:	Resale # (PA residents):			

Quantity	Description and lot number	Price	Total

Minimum \$20	Sub total	
Pennsylvania tax (resident of PA only)	6%	
Shipping and handling (we will quote)		
	Total	

We accept checks or credit card

We will ship via USPS priority mail unless you request otherwise.

Credit card information						
Visa	Master card	Discover	Amex	Card #		
Name of card holder:			Exp. Date:			
Billing Address:			Last 3 Numbers on back of card:			
City, Sta	tte, Zip			Signature		