

Name:

Barbara Zarcone – Independent Jewelry Consultant

Order Form

Address:									
City:			ST:	Zip:					
Email:									
Home Phone:				Cell Phone:					
Hostess: Party Date:									
Item Number Size Page # Ite					em Name Quantity Cost Total			Total	
THANK YOU FOR YOUR ORDER					Total:				
CASH OR CHECK PREFERRED					Shipping:				
CHECK PAYABLE TO: Barbara Zarcone					Subtotal:				
(908) 672-3979					6.875% Sales Tax: (Required by law) Total Due:				
<u>barbara4jewelry@gmail.com</u> barbarazarcone.mypremierdesigns.com									
Diagon	- 4 - Loron	ΛΙΙ :£-	was ations but set	if massica			d ou \ /:	mls ()	
Please complete ALL information below if paying by credit card (Mastercard or Visa only)									
Credit Card #:					Expiration Month: / Year:				
CCV (3 digit code on back):					Billing Zip Code:				
Approval Signature:									