

J. KATCH CREATIONS ORDER FORM

Date: Customer Name: Address: Phone: Email Address: Send To Name: Address: Phone:

| ITEM | SIZE | QUANTITY | PRICE EACH | TOTAL |
|------|------|----------|------------|-------|
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Payment Cash ___ Check ___ Money Order ___

TAX (Florida add: 7%) _____

Visa ___ MasterCard ___ American Express ___

PACK & SHIP _____

(VIA UPS GROUND UNLESS OTHERWISE SPECIFIED)

Expiration ___ CVV2 _____

TOTAL _____

Special Instructions

J. Katch Creations

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www.JKatchCreations.com