

Order Form
Fax to: (215) 248-0503

Brooke Jaron
 122 Bethlehem Pike
 Philadelphia, PA 19118
 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%	
Philadelphia tax (residents of Philly only)	1%	
Shipping and handling (we will quote)		
	Total	

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

Credit card information	
Visa Master card Discover <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Card #
Name of card holder:	Exp. Date:
Billing Address:	Last 3 Numbers on back of card:
City, State, Zip	Signature