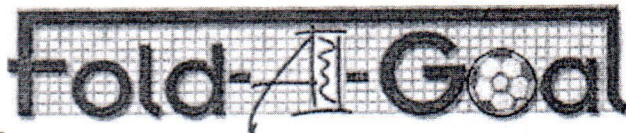


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Bill To:	Ship To:
Customer ID# (if available) _____	Name _____
Name _____	c/o _____
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Address _____	City/State/Zip _____
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Quantity	Item #	Description	Color	Size	Page	Unit Price	Total

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Credit Card Number _____

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Expiration Date _____ Amount \$ _____

Signature _____ Date _____

Credit Card Code # (last 3 digits on back of card) _____

SUBTOTAL	
CA Add Sales Tax	
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THANK YOU for Your Order