

NOA SKEIN ORDER

SHARON GRAY

CLIENT PO: _____

PO Box 1019

DATE ISSUED: _____

Sag Harbor NY 11963

COMPANY: _____

212 944 9079 tel

sharongray@fashikon.com

www.fashikon.com

Shipping information:

ADDRESS: _____

FLOOR: _____

CITY/STATE: _____

ZIP: _____

PHONE: _____ EXT: _____

FAX: _____

ATTENTION: _____

EMAIL: _____

Billing Information: _____ Same address as shipping

CREDIT CARD: _____ MC _____ VISA _____ AMEX

EXP DATE: _____ CARD NO: _____

BILLING ADDRESS: _____

BILLING CITY/STATE: _____ ZIP: _____

TYPE NAME ON CARD: _____

COMMENTS: Do not use a digital signature.

ORDERS WILL BE PROCESSED THE SAME DAY IF PLACED BY 4PM, MONDAY - FRIDAY.

REGARDING DELIVERY: ALLOW 3-5 BUSINESS DAYS starting the day after the order has been placed for delivery within New York. Allow an extra day for shipment outside of New York.

Subtotal: _____

For New York orders, a sales tax of 8.875% will be added.

Shipping & Handling: _____

SHIPPING ACCOUNT #: _____

Sales Tax: _____

Enter your preferred shipping account information above for orders outside of the New York area.

Total: _____

SUBMIT YOUR ORDER: *Click the button below to automatically attach this order form to an email message which will be addressed to norders@fashikon.com. Do not change the subject field. You will be contacted via email acknowledging the receipt of your order. Please print your completed order form before closing this window.* You will not be able to save the completed form unless you have the full version of Adobe Acrobat. This order must be received in an .fdf format.

This order constitutes a contract, is not cancelable, and contains the entire agreement between the parties. Sharon Gray assumes no responsibilities for damages to, or loss of, products while in transit. All signed orders are final. Ordered products may not be refused or returned.