

INSTRUCTIONS; Please fill out the form below, mail it to:

**Works Of Art
c/o Iris Stripling
2611 288th
#63
Federal Way, WA, 98003**

- and Iris, or a member of her staff, will contact you shortly to confirm Order, Pricing and Payment Plan.

Contact Information:

Name: _____

Address: _____

Phone: _____

E-mail: _____

Group Information, if applicable:

your ... Groups Name: _____ _____ _____	<u>Group Type:</u> <input type="checkbox"/> Business, or other for profit. <input type="checkbox"/> Organization, or other non-profit.	Groups purpose/line-of-biz (Optional): _____ _____ _____ _____
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Order Item Detail

Item Name / Title:	Item Desc (Optional):	Quantity (if more than 1):	<i>Special Instructions for Item?</i> Enter here:

Special Instructions for Order?

Enter here: _____

