



**Impressions By Lirica
Broom Shoppe
www.impressbylirica.com**



Billing
Address: _____

Shipping
Address: _____

Phone Number: _____
E-Mail
Address: _____

Phone Number: _____
E-Mail
Address: _____

Visa
 Master Card
 Discover
 Amex
 Check
 Cashiers Check
 Money Order

Credit Card #: _____ / _____ / _____
 CVV#: _____
 Exp: _____

Item #	Qty.	Description	\$ Total
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

Sub Total \$ _____

**All pricing includes
shipping and handling
charges.**

Sales Tax (CA 7.75%) \$ _____

Discount Amount \$ _____

Total Amount Due \$ _____