

# Artisan Ornaments

Name:

Address:

City:

State:

Zip:

Phone:

Email:

Item #	Item Description	Sold Office Use Only
1		
2		
3		
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11		
12		
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15		
16		
17		
18		

This box for office use

Check total \_\_\_\_\_ Check requested \_\_\_\_\_ Check sent \_\_\_\_\_

Total Sales: \_\_\_\_\_

Sales - 35%: \_\_\_\_\_