bodhichitta botanicals

A BOUNTIFUL WAY OF BEING

Sales Order Sheet

Bill To:	
Company:	
Name:	
Address:	
City:	
State:	Zip:
Email:	
Website:	
Phone:	( )
Fax:	( )

Ship To:	
Company:	
Name:	
Address:	
City:	
State:	Zip:
Date Ordered:	
Date Shipped:	

Order / Invoice #	
P.O. #	
Account / Customer #	
Sellers Permit #	

Payment Method / Terms	Check / Credit Card / Net 30
Credit Card Info	Visa / MC / Discover
Card / Check #	
Expiration Date	
Name on Card	

Salesperson	Type of Business	Customer Signature	Date

Item #	Product Description	Quantity		Price / Unit	Total
				Sub-Total	

Discount Code		
	Tax	
	Shipping	
	Total Due	

Thank you for your Business!

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