

L'air D'or®

Order Form

B I L L T O	Name _____	S h i p T O	Name _____
	Street Address (no PO Boxes Please) _____		Street Address (no PO Boxes Please) _____
	City _____		City _____
	State _____ Zip _____		State _____ Zip _____

Date _____	Fax # _____
Day Phone# _____	Evening # _____

We Must Have A Phone Number To Process this Order

Product Number	Product Description (size, Color, Etc.)	Quantity	Price Each	Cost
<u>Boxed Collection</u>				
1	10268 Parfum 1 oz, 30 ml	_____	\$300.00	_____
2	12069 Parfum ½ oz, 15 ml	_____	\$200.00	_____
3	10270 Parfum ¼ oz, 7.5 ml	_____	\$100.00	_____
4	11002 Magnium Collection 31 oz, 930 ml	_____	\$9,500.00	_____
5	10292 Eau De Parfum, Spray 3.3 oz, 100 ml	_____	\$88.00	_____
6	10290 Eau De Parfum, Spray 1.8 oz, 55	_____	\$60.00	_____
7	10287 Eau De Parfum, Spray 1.2 oz, 36 ml	_____	\$40.00	_____
8	10292 Eau De Parfum Mini 1/8 oz, 3.75 ml	_____	\$20.00	_____
9	16000 Eau De Parfum Vial Sampler, 12 vials, .023 oz, .7 ml	_____	\$20.00	_____
<u>Limited Gift Boxed Collection</u>				
10	11602 Eau De Parfum Gift Boxed 1/8 oz, 3.75 ml	_____	\$50.00	_____
11	11600 Eau De Parfum Gift Boxed 1/4 oz, 7.5 ml	_____	\$100.00	_____
12	11601 Eau De Parfum Gift Boxed 1 oz, 30 ml	_____	\$300.00	_____
13	_____	_____	_____	_____
14	_____	_____	_____	_____

No Minimum Order Required

Satisfaction Assured

If for any reason you feel your purchase does not live up to the standards we have promised, you may return it within fifteen days from the date of purchase and we will either replace the item or make a credit or cash adjustment. **You must call Customer Service for a return authorization # at 563-964-2692**

Sub Total	\$ _____
IA Sales Tax 6%	\$ _____
Shipping & Handling	\$ <u>9.00</u>
Total Cost	\$ _____

Visa Master Card Info
 Account # _____
 Expires _____ CVV2 Field _____
 Address on Card _____
 Authorization Signature _____

L'air D'or
201 S. Main Street
Garnavillo, IA 52049
1-563-964-2692
lairdor@alpinecom.net

