



# WHOLESALE ORDER FORM

**SUMMER 2018**

Order Date: \_\_\_\_\_  
 Invoice Number: \_\_\_\_\_

Kaitlyn Brennan  
 kaitlyn.abrennan@gmail.com  
 www.kaitlynbrennan.com  
 613-809-8796

## ORDER FORM

Business name: \_\_\_\_\_ Contact name: \_\_\_\_\_  
 Website: \_\_\_\_\_ Phone number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Business Address: \_\_\_\_\_

## ORDER FORM

Quantity	Form	Theme	Colour*	Unit Price	Total

\* Write the number of the colour you would like or put "variety" if you want the artist to use a different colour on each item. If you would prefer certain colours please write down each number separated by a comma.

Subtotal	
Shipping	
Total	
Deposit 50% Subtotal	