OF 07-07

JELLYBEAN Sales Order Form

OF MIAMI, INC.

Date ____________

Resource/Purchase Order ____________

BILL TO ____________
Address ____________
City ____________ State ______ Zip ______
Country ______ Fax ______ Phone ______

SHIP TO ____________
Address ____________
City ____________ State ______ Zip ______
Country ______ Fax ______ Phone ______

Salesperson ____________
Buyer ____________
Phone ____________
Fax ____________
E-mail ____________

Terms ____________
Net 30 days ☐ C.O.D. ☐
Credit Card Exp Date ______
Credit Card ____________
☐ VISA ☐ MasterCard ☐ DISCOVER ☐ AMERICAN EXPRESS Cards

Ship Via ____________
Start ____________
Complete ____________
Security Code ______
(3-4 digit code on card)
Sheet ______ of ______

To Place an Order: Fax 305-557-4199 • Phone 800-870-6603 • www.jellybeanofmiamiinc.com

STYLE	COLOR	DESCRIPTION	SIZE 8.5	SIZE 10.5	SIZE 12.5	SIZE 14.5	SIZE 16.5	SIZE 18.5	TOTAL PCS.	UNIT PRICE	TOTAL PRICE
								Totals			

This order is accepted subject to customer's approval and valid unless cancelled by phone within 24 hours by the purchaser. Garments already started in production are the customer's financial responsibility. Returns will be accepted for credit only if there's a manufacturer's error in construction, size or color or goods not shipped in accordance with the specifications of sale, and then only within 5 days from receipt of merchandise. Any other unauthorized returns will not be accepted. Buyer assumes all shipping cost unless other responsibility is notified and approved by manufacturer. Colors & designs may vary slightly.

Buyer's Signature ____________

Date ____________