

Ultimate Pad Cover Replacement Order Form

Today's Date:

BILL TO		<div style="border: 1px solid black; width: 10px; height: 10px; margin: 0 auto;"></div>	SHIP TO <input type="checkbox"/> Same as Billing Information	
Name:			Name:	
Attention:			Attention:	
Address:			Address:	
City:			City:	
State/Zip:			State/Zip:	
Phone (Office):				
Phone (Cell):				
Email Address:				

	DESCRIPTION	QTY	UNIT PRICE	TOTALS
<input type="checkbox"/>	Small Pad Covers (includes shipping)		\$26.00	
<input type="checkbox"/>	Medium Pad Covers (includes shipping)		\$30.00	
<input type="checkbox"/>	Large Pad Covers (includes shipping)		\$35.00	
<input type="checkbox"/>	Full Set of 6 Pad Covers (includes shipping)		\$182.00	
<input type="checkbox"/>	Faster Shipping (2-3 Days) - add \$20			
	Minumum Order is \$50.00		Subtotal:	
	Sales Tax: (On Unit Price Only - For California Purchases: 8.75%)			
			Amount Owing:	

Paying By Check

Make the check out to **LipoMelt Technologies**. To expedite the process, you can deposit your check directly into our Wells Fargo account. (Call for details)

Paying by Credit Card

Complete this section and don't forget to sign. You can fax or email this form. (See contact info below)

Card Owner's Name:			
Credit Card Type:		Credit Card Number:	
Expiration Date:		Security Number:	
Card Owner's Signature:			
Date Signed:			

Buyer's Name:	
Buyer's Signature:	
Date Signed:	

Comments: (All sales are final. Unless otherwise noted, there are no refunds.)