Kush Oasis Enterprises, LLC

ORDER FORM

228 Martin Dr, Syosset, NY 11791
Ph:516-513-1316, Fax 516-470-1317
Email: kushcreations@yahoo.com
Web: www.OmYogaSupplies.com

ORDER DATE:
ORDER #:

ORDERED BY:

Buyer Name:_____
Company: _____
Street/Route Box/Apt.
City State Zip
Daytime phone Evening Phone
E-mail address

SHIP TO:

Buyer Name:_____
Company: _____
Street/Route Box/Apt.
City State Zip
Daytime phone Evening Phone
E-mail address

Qty	Item No.	Item Description	Unit Price($)	Amount ($)

Payment Method:

( ) Visa ( ) MasterCard ( ) American Express ( ) Cash
( ) Checks* ( ) Credit Term* ( ) Money Order*

Card Number:
Experation Date:

Customer Signature:

Merchandise Total _____
Sales Tax* _____
Order Total _____
Shipping Charges* _____
Payment Total _____

* For check – Product ship upon clearance through bank,Check or money order payable to Kush Oasis Enterprises.
* For credit term – Subject to approval (Complete application form)
* Tax Id/Resale certificate is needed to waive off Sales Tax Charges