## Simple Form Sample

| First Name:  |  |
|--------------|--|
| Last Name:   |  |
| Email:       |  |
| Phone:       |  |
|              |  |
| Amount:      |  |
| Amount x 12: |  |
| Pick one:    |  |
| Pick two:    |  |
| Dropdown:    |  |
|              |  |
|              |  |