

# **Professional Receipt Template**

**Date** 5/10/2018

### CLIENT INFORMATION

Belia Corradengo

apittford0@o cn.ne.jp

46 7th Trail New Ha, Connecticut, 06538 United States

## ADDITIONAL INFORMATION

I would like more informatio n on becoming a Distributor

Yes

I would like more informatio n on purchasin g my products at a wholesale price:

Yes

C	PHONE	NUMBER

(24) 583-1286

### **SHIPPING ADDRESS**

46 7th Trail New Ha, Connecticut, 06538

#### ORDER DETAILS

Descri ção	Valor
Insta ntly Agel ess	\$25.00
Samp le of Seru m \$12.0 0 x 2	\$24.00
	\$49.00 \$9.00

\$58.00

ADDITIONAL REQUESTS

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