Name:_____
Address:_____
_____
City:_____ State:_____ Zip:_____
Phone:_____ E-mail:_____

10% off past Host #_____

Would you like to know more about...

_ Hosting a cooking show
_ Becoming a Consultant
_ Fund-Raiser Information
_ Pampered Chef Wedding Shower
_ Wedding Registry

Item #	Product	Qty.	Price	Total

Subtotal= _____
Shipping/Handling + 4.00
___% sales tax + _____
Grand Total = _____

Method of Payment:
?Check-Please make Payable to:
?Charge-Visa MasterCard

_ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _

Exp. Date ___/___ Signature _____
Name on Card (please print) _____

Name:_____
Address:_____
_____
City:_____ State:_____ Zip:_____
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