



"A Natural Soy Candle"

Customer Order Form

Date: _____

Nick & Tasha Roth • Phone: 605-458-2491
250 Brook Street • Wessington, SD 57381

Bob & Vicki Prentice • Phone: 605-458-2563
410 Wessington Street South • Wessington, SD

To our customers: Our goal is your 100% total satisfaction. If for any reason you are not satisfied with your candle order, please let us know right away and we will do everything we can to make it right.

Customer Information

Name: _____ Email Address: _____
 Street Address: _____ City: _____
 State: _____ Zip Code _____ County: _____ Telephone Number: _____
 Customer Mailing Address (if different): _____
 City: _____ State: _____ Zip Code: _____

Are you interested in:

- Attending a candle party? Hosting a candle party?
 Learning more about how you can start your own home-based businesses making and selling candles?

Choose Your Scents, Colors & Sizes

Have a favorite color? We can customize! Or choose from the colors below:
 Write color name on line next to scent: White • Blue • Red • Yellow • Green • Purple • Pink • Orange
 Indicate candle size: S • M • L

<input type="checkbox"/> Island Breeze		<input type="checkbox"/> Green Tea		<input type="checkbox"/> Slices of Fruit	
<input type="checkbox"/> Almond Creme		<input type="checkbox"/> Berry Berry		<input type="checkbox"/> Butter Pecan	
<input type="checkbox"/> Apple Orchard		<input type="checkbox"/> Heaven		<input type="checkbox"/> Spiced Orange	
<input type="checkbox"/> Carmel Apple		<input type="checkbox"/> Milk Chocolate		<input type="checkbox"/> Amber Romance	
<input type="checkbox"/> Cinnamon & Spice		<input type="checkbox"/> Pear Berry		<input type="checkbox"/> Vanilla	
<input type="checkbox"/> Cinnamon Crunch		<input type="checkbox"/> Huckleberry		<input type="checkbox"/> Love Spell	
<input type="checkbox"/> Cool Breeze		<input type="checkbox"/> Hyacinth		<input type="checkbox"/> Yuzu Fruit	
<input type="checkbox"/> Cranberry		<input type="checkbox"/> Cabernet		<input type="checkbox"/> Plumeria	
<input type="checkbox"/> Creme Brulee		<input type="checkbox"/> Peach Nectar		<input type="checkbox"/> Rose Passion	
<input type="checkbox"/> Cucumber Melon		<input type="checkbox"/> Lily of the Valley		<input type="checkbox"/> Wild Strawberry	
<input type="checkbox"/> Escape		<input type="checkbox"/> Mango Sorbet		<input type="checkbox"/> Sweet Lemon Grass	
<input type="checkbox"/> Camation		<input type="checkbox"/> Mocha Chino		<input type="checkbox"/> Lavender	
<input type="checkbox"/> Lilac		<input type="checkbox"/> Orange Creamside		<input type="checkbox"/> Blueberry Pie	
<input type="checkbox"/> French Vanilla		<input type="checkbox"/> Pina Colada		<input type="checkbox"/> Citrus & Sage	
<input type="checkbox"/> Gardenia		<input type="checkbox"/> Rain		<input type="checkbox"/> Citronella	
<input type="checkbox"/> Jasmine		<input type="checkbox"/> Seashore		<input type="checkbox"/> Banana Nut Bread	

To Further Customize Your Order Choose Special Features

Small containers ___ x \$ 6.95 ea. = \$ _____
 Medium containers ___ x \$12.95 ea. = \$ _____
 Large containers ___ x \$19.95 ea. = \$ _____
 Coffee Mug ___ x \$ 9.95 ea. = \$ _____
Special Features
 Photo and/or text ___ x \$ 10.00 ea. = \$ _____
 Hand-painted ___ x \$ 3.00 ea. = \$ _____
 Custom Color ___ x \$ 1.00 ea. = \$ _____
 Extra Scent ___ x \$ 1.00 ea. = \$ _____
Order Total \$ _____

* Prices subject to change

A. Order Total \$ _____
B. Shipping & Handling (10% of Line A) \$ _____
C. Sub-Total (Lines A + B) \$ _____
D. Sales Tax (___% of line C) \$ _____
E. Total Amount Due (Line C + D) \$ _____

* The sales tax rate you pay is based on the rate where you live.

NOTES: