



# VÁQUERO ENTERPRISES

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## Order Form

Date: \_\_\_\_\_

	<u>Ordered by</u>	<u>Ship to (if different)</u>
Name	_____	_____
Address	_____	_____
City	_____	_____
State/Provence	_____	_____
Zip/Postal Code	_____	_____
County/Region	_____	_____
Phone	_____	_____
Fax	_____	_____
e-mail	_____	_____

No.	Description	Price	Total
			\$
			\$
			\$
			\$
		<b>Subtotal</b>	\$
<b>8.00% sales tax for shipments to California locations</b>		<b>Sales Tax</b>	\$
<b>See "How to Order" and contact us regarding shipping charges</b>		<b>Shipping</b>	\$
		<b>Total</b>	\$

### Credit Card (VISA, MasterCard or American Express)

Card No.: \_\_\_\_\_ Security No.: \_\_\_\_\_ Expiration: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_