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Name	•				
Addre	ess:				
City, State, Zip:					
Phone:					
Email	•				
Credi	t Card #, expiration				
date and security code					
Item	Description		Quantity	Price	Total
				Subtotal:	
PA State Sales Tax (6% if applicable):					
Shipping (25 to 49.99=\$8 50 to 99.99=\$10 100 or more=\$12):					
Grand Total:					
Comn	nents:				