



JUST LIKE SUGAR CANADA INC. RETAIL ORDER FORM

69 Gustav Crescent

DATE: _____

Willowdale, Ontario M2M 4G9

CUSTOMER PHONE: _____

TELEPHONE/FAX: Local 416-590-9262

TELEPHONE/FAX: TOLL FREE ORDER LINE: 1-877-784-2707

EMAIL: justlikesugarcanadainc@rogers.com

Web Site: <http://www.justlikesugar.ca>

**BILL TO:
ADDRESS**

**SHIP TO:
ADDRESS**

If are in the USA please order from the US website

PLEASE LIST ALL PRODCUTS REQUESTED AND THE QUANTIES NEEDED

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	AR160GR-2 JUST LIKE SUGAR BOTTLE	\$7.75	\$

SUBTOTAL: _____

SHIPPING EXTRA PLEASE CALL FOR COST

\$ _____

PLEASE ADD AN ADDITIONAL \$12.00 FOR THE COD TAG

COD \$ _____

TOTAL DUE: _____

CREDIT CARD: VISA MC AMEX CHECK ENCLOSED COD

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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EXPIRE DATE:

NAME ON CARD _____ SIGNATURE _____

THANK YOU FOR YOUR ORDER. PLEASE ENJOY OUR PRODUCT.