

ORDER DATE / /

NEW ADDRESS

LAST FIRST

ADDRESS

**LAB ORDER
BAR CODE**

CITY STATE ZIP

POSE QTY SIZE FINISH PRICE

HOME # 216-330-440
LIFECYCLE Wed-Child-Fam-Sen
IS THIS A SURPRISE? **YES**

WORK # 216-330-440
CELL # 216-330-440
SUR. PHONE

EMAIL ADDRESS

REMARKS

MC VISA DISC AMEX CHECK #

CARD # EXP. /

PRODUCTION USE

SENT TO LAB - BACK FROM LAB -

ALBUM ORDERED - ALBUM IN -

FRAME ORDERED - FRAME IN -

ORDER COMPLETE - CLIENT NOTIFIED -

APPROXIMATE FINISH DATE:

Our portraits are a custom product. We take the utmost care in providing you with only the highest quality portraiture. Because of this, finish dates are only an approximation.

I AGREE THAT THIS STUDIO OR AN AUTHORIZED AGENT REPRESENTING SAID COMPANY CAN USE ANY IMAGES FROM THIS SESSION FOR ANY ADVERTISING, DISPLAY OR PROMOTIONAL USES. THIS INCLUDES ANY TELEVISION OR COMMERCIAL PRODUCTIONS.

This authorizes you to complete this order as written.

I have checked this order carefully. All pose numbers, finishes, quantities and prices are correct.

Any special services or retouching I want have been stated.

I agree with the balance due and I agree to pick up my finished order within 30 days of its completion. If I do not pick up my finished order within 30 days, I agree to pay a 2% service charge per month on the unpaid balance

I also agree to pay all collection and/or attorney fees if this order is not picked up within 30 days of completion.

UPON SIGNING THIS ORDER, I REALIZE THAT NO PART OF THIS ORDER CAN BE CHANGED, MODIFIED OR CANCELED.

CLIENT: _____



NORTH BAY
PORTRAIT DESIGN



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Mentor, Ohio 44060

440-951-0441

www.northbaygallery.com

FRAMES, ALBUMS, FOLIOS

ITEM #	QTY	SIZE	VENDOR	PRICE

	PAYMENT AMOUNTS	DATE
SUBTOTAL		
TAX		
TOTAL		
GIFT CERTIFICATE	—	
DESIGN CREDIT	—	
BALANCE		
PAYMENT		
PAYMENTS DUE COD		

_____ DUE ON / _____ DUE ON /