

**** Billing Information -**

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Home Phone: _____

Alt. Phone: _____

Shipping information if different from billing:

Name: _____

Address: _____

City, State, Zip _____

**Make Checks Payable To: Judy Kessinger
10101 Leaning Tree Ct.
Louisville, KY 40291**