

Bill To \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone/Fax \_\_\_\_\_  
 Salesman \_\_\_\_\_

Ship To \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Purchase Order \_\_\_\_\_  
 Requested Ship Date \_\_\_\_\_  
 Cancel Date \_\_\_\_\_

**Wayne Carver™**

2412 Grant Ave., Rockford IL 61103  
**Toll Free: 800-573-7123**  
**Fax: 815-397-0003**  
 email: sales@waynecarver.com

# SEA TURTLE NECKLACE REORDER FORM

<input type="checkbox"/> A	<input type="checkbox"/> Audrey	<input type="checkbox"/> D	<input type="checkbox"/> Holly	<input type="checkbox"/> Kelsey	<input type="checkbox"/> Megan	<input type="checkbox"/> Samantha	<input type="checkbox"/> DANCE
<input type="checkbox"/> Aaliyah	<input type="checkbox"/> Autumn	<input type="checkbox"/> Daisy	<input type="checkbox"/> Isabel	<input type="checkbox"/> Kennedy	<input type="checkbox"/> Melanie	<input type="checkbox"/> Sara	<input type="checkbox"/> DAUGHTER
<input type="checkbox"/> Abby	<input type="checkbox"/> Ava	<input type="checkbox"/> Daniela	<input type="checkbox"/> Isabella	<input type="checkbox"/> Kimberly	<input type="checkbox"/> Melissa	<input type="checkbox"/> Sarah	<input type="checkbox"/> DIVA
<input type="checkbox"/> Abigail	<input type="checkbox"/> Avery	<input type="checkbox"/> Danielle	<input type="checkbox"/> Isabelle	<input type="checkbox"/> Kristen	<input type="checkbox"/> Mia	<input type="checkbox"/> Savannah	<input type="checkbox"/> FAITH (WO
<input type="checkbox"/> Addison	<input type="checkbox"/> B	<input type="checkbox"/> Destiny	<input type="checkbox"/> J	<input type="checkbox"/> Kylie	<input type="checkbox"/> Michelle	<input type="checkbox"/> Shelby	<input type="checkbox"/> FOREVER
<input type="checkbox"/> Adrian	<input type="checkbox"/> Bailey	<input type="checkbox"/> Diana	<input type="checkbox"/> Jacqueline	<input type="checkbox"/> L	<input type="checkbox"/> Mikayla	<input type="checkbox"/> Sierra	<input type="checkbox"/> FRIENDS
<input type="checkbox"/> Adriana	<input type="checkbox"/> Bianca	<input type="checkbox"/> E	<input type="checkbox"/> Jada	<input type="checkbox"/> Laura	<input type="checkbox"/> Miranda	<input type="checkbox"/> Skylar	<input type="checkbox"/> GIRLS RUL
<input type="checkbox"/> Alexa	<input type="checkbox"/> Breanna	<input type="checkbox"/> Elizabeth	<input type="checkbox"/> Jade	<input type="checkbox"/> Lauren	<input type="checkbox"/> Molly	<input type="checkbox"/> Sofia	<input type="checkbox"/> I (H) YOU
<input type="checkbox"/> Alexandra	<input type="checkbox"/> Briana	<input type="checkbox"/> Ella	<input type="checkbox"/> Jamie	<input type="checkbox"/> Layla	<input type="checkbox"/> Monica	<input type="checkbox"/> Sophia	<input type="checkbox"/> LOVE
<input type="checkbox"/> Alexandria	<input type="checkbox"/> Brianna	<input type="checkbox"/> Emily	<input type="checkbox"/> Jasmine	<input type="checkbox"/> Leah	<input type="checkbox"/> Morgan	<input type="checkbox"/> Sophie	<input type="checkbox"/> MOM
<input type="checkbox"/> Alexis	<input type="checkbox"/> Brittany	<input type="checkbox"/> Emma	<input type="checkbox"/> Jenna	<input type="checkbox"/> Leslie	<input type="checkbox"/> Mya	<input type="checkbox"/> Stephanie	<input type="checkbox"/> PRINCESS
<input type="checkbox"/> Alicia	<input type="checkbox"/> Brittney	<input type="checkbox"/> Erica	<input type="checkbox"/> Jennifer	<input type="checkbox"/> Lillian	<input type="checkbox"/> N	<input type="checkbox"/> Summer	<input type="checkbox"/> SISTER
<input type="checkbox"/> Allison	<input type="checkbox"/> Brooke	<input type="checkbox"/> Erika	<input type="checkbox"/> Jesse	<input type="checkbox"/> Lily	<input type="checkbox"/> Naomi	<input type="checkbox"/> Sydney	<input type="checkbox"/> SWEET (H)
<input type="checkbox"/> Alyssa	<input type="checkbox"/> Brooklyn	<input type="checkbox"/> Erin	<input type="checkbox"/> Jessica	<input type="checkbox"/> Lindsay	<input type="checkbox"/> Natalia	<input type="checkbox"/> T	<input type="checkbox"/> XOXO
<input type="checkbox"/> Amanda	<input type="checkbox"/> C	<input type="checkbox"/> Eva	<input type="checkbox"/> Jillian	<input type="checkbox"/> Lindsey	<input type="checkbox"/> Natalie	<input type="checkbox"/> Taylor	
<input type="checkbox"/> Amber	<input type="checkbox"/> Caitlin	<input type="checkbox"/> Evelyn	<input type="checkbox"/> Jocelyn	<input type="checkbox"/> Lisa	<input type="checkbox"/> Nevaeh	<input type="checkbox"/> Tiffany	
<input type="checkbox"/> Amelia	<input type="checkbox"/> Caroline	<input type="checkbox"/> F	<input type="checkbox"/> Jordan	<input type="checkbox"/> Lydia	<input type="checkbox"/> Nicole	<input type="checkbox"/> Trinity	_____
<input type="checkbox"/> Amy	<input type="checkbox"/> Casey	<input type="checkbox"/> Faith	<input type="checkbox"/> Julia	<input type="checkbox"/> M	<input type="checkbox"/> Olivia	<input type="checkbox"/> Valeria	_____
<input type="checkbox"/> Ana	<input type="checkbox"/> Cassandra	<input type="checkbox"/> G	<input type="checkbox"/> Julie	<input type="checkbox"/> Mackenzie	<input type="checkbox"/> P	<input type="checkbox"/> Vanessa	_____
<input type="checkbox"/> Andrea	<input type="checkbox"/> Cassidy	<input type="checkbox"/> Gabriela	<input type="checkbox"/> K	<input type="checkbox"/> Madeline	<input type="checkbox"/> Paige	<input type="checkbox"/> Victoria	_____
<input type="checkbox"/> Angela	<input type="checkbox"/> Catherine	<input type="checkbox"/> Gabriella	<input type="checkbox"/> Kaitlyn	<input type="checkbox"/> Madelyn	<input type="checkbox"/> Patricia	<input type="checkbox"/> W	_____
<input type="checkbox"/> Angelica	<input type="checkbox"/> Charlotte	<input type="checkbox"/> Gabrielle	<input type="checkbox"/> Karen	<input type="checkbox"/> Madison	<input type="checkbox"/> Payton	<input type="checkbox"/> Whitney	_____
<input type="checkbox"/> Angelina	<input type="checkbox"/> Chelsea	<input type="checkbox"/> Gianna	<input type="checkbox"/> Kate	<input type="checkbox"/> Makayla	<input type="checkbox"/> Peyton	<input type="checkbox"/> Zoe	_____
<input type="checkbox"/> Anna	<input type="checkbox"/> Cheyenne	<input type="checkbox"/> Grace	<input type="checkbox"/> Katelyn	<input type="checkbox"/> Margaret	<input type="checkbox"/> R	<input type="checkbox"/> Zoey	_____
<input type="checkbox"/> April	<input type="checkbox"/> Chloe	<input type="checkbox"/> Gracie	<input type="checkbox"/> Katherine	<input type="checkbox"/> Maria	<input type="checkbox"/> Rachel	<input type="checkbox"/> ANGEL (WO	
<input type="checkbox"/> Ariana	<input type="checkbox"/> Christina	<input type="checkbox"/> H	<input type="checkbox"/> Kathryn	<input type="checkbox"/> Mariah	<input type="checkbox"/> Rebecca	<input type="checkbox"/> BELIEVE	
<input type="checkbox"/> Arianna	<input type="checkbox"/> Christine	<input type="checkbox"/> Hailey	<input type="checkbox"/> Katie	<input type="checkbox"/> Marissa	<input type="checkbox"/> Riley	<input type="checkbox"/> BEST FRIEN	
<input type="checkbox"/> Ashley	<input type="checkbox"/> Claire	<input type="checkbox"/> Haley	<input type="checkbox"/> Kayla	<input type="checkbox"/> Mary	<input type="checkbox"/> Ruby	<input type="checkbox"/> BLANK	
<input type="checkbox"/> Ashlyn	<input type="checkbox"/> Courtney	<input type="checkbox"/> Hannah	<input type="checkbox"/> Kaylee	<input type="checkbox"/> Maya	<input type="checkbox"/> S	<input type="checkbox"/> CUTIE	
<input type="checkbox"/> Aubrey	<input type="checkbox"/> Crystal	<input type="checkbox"/> Heather	<input type="checkbox"/> Kelly	<input type="checkbox"/> Mckenzie	<input type="checkbox"/> Sabrina	<input type="checkbox"/> DADDY'S GI	