

\* Denotes "Series Three" / \*\* Denotes "Series Four"

5X7 PORTRAITS (SOLD UNFRAMED)		Quantity (Minimum of 3 of each)	5x7s - \$5.00 each 8x10s - \$9.00 each	<b>TOTAL</b>
*	"Aunt Astrid"	AA-5X7		
	"Aunt Bertha"	AB-5X7		
**	"Aunt Lizzie"	AL-5X7		
	"Aunt Madeline"	AM-5X7		
	"Aunt Sarah"	AS-5X7		
**	"Aunt Tilly"	AT-5X7		
*	"Baby Jane"	BJ-5X7		
	"Cousin Claudia"	CC-5X7		
	"Cousin Drusilla"	CD-5X7		
*	"Cousin Harold"	CH-5X7		
	"Da Vinci Corpse"	DC-5X7		
	"Grandpa Esbat"	GE-5X7		
	"Granny Gertrude"	GT-5X7		
	"Granny Hazel"	GH-5X7		
**	"Grandpa Zachary"	GZ-5X7		
*	"Little Edgar"	LE-5X7		
	"Little Lucy"	LL-5X7		
	"Little Mary"	LM-5X7		
	"Little Ruthie"	LR-5X7		
*	"Little Ophelia"	LO-5X7		
	"Little Thomas"	LT-5X7		
**	"Little Willie"	LW-5X7		
**	"Scary Christmas"	SC-5X7		
**	"Till Death Do Us Part"	TD-5X7		
	"Uncle Bernie"	UB-5X7		
*	"Uncle Eamon"	UE-5X7		
	"Uncle Harry"	UH-5X7		
	"Uncle Percy"	UP-5X7		
	"Uncle Roderick"	UR-5X7		
<b>8X10 PORTRAITS (SOLD UNFRAMED)</b>				
	"All Hallow's Eve"	AHE-8X10		
	"Baby Jane" (8x10)	BJ-8X10		
	"Midwestern Matricide"	MM-8X10		
	"Tell No Tales" (8x10)	TNT-8X10		
	"Terrible Timmy" (8x10)	TT-8X10		
	"The Restless Spirit"	RS-8X10		
	"The Wicked Wench" (8x10)	WW-8X10		

Store Name: \_\_\_\_\_

Buyer's Name (Please print): \_\_\_\_\_

Ship to Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_

Fax Number: (     ) \_\_\_\_\_

Credit Card Type (circle one): MC or VISA

Name on Credit Card: \_\_\_\_\_

Card #: \_\_\_\_\_

Expiration date: (Month, Year) \_\_\_\_/\_\_\_\_

Last 3 digits of CVV (on back of card) #: \_\_\_\_\_

Billing Address (if different from shipping):

Line One: \_\_\_\_\_

Line Two: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Re-sale #: \_\_\_\_\_

Requested Ship Date: \_\_\_\_\_

Authorization to Bill Shipping: \_\_\_\_\_

Signature \_\_\_\_\_

I understand that "Haunted Memories" products are sold with a "No cancellation, no return" policy. My signature below authorizes this order to be placed.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Haunted Memories Changing Portraits**  
P.O. BOX 3584 / SEAL BEACH, CA 90740  
Phone: (562) 810-5317 Fax: (562) 439-4080

SUBTOTAL \$ \_\_\_\_\_  
Shipping & Handling \$ \_\_\_\_\_  
**FINAL TOTAL \$ \_\_\_\_\_**