

DESIGNER DECALS

DESIGNER DECALS PRODUCT LINE AND 2015 PRICE SHEET/ORDERING FORM

| STYLE | UNIVERSAL PRODUCT CODE | QUANTITY | PHOTO REFERENCE |
|-----------------------|------------------------|----------|---|
| Sexy Lips ORANGE | 616909321438 | |  |
| Sexy Lips GREEN | 616909321445 | |  |
| Sexy Lips MULTI-COLOR | 616909321452 | |  |
| Sexy Lips FUCHSIA | 616909321469 | |  |
| Sexy Lips RED | 616909321476 | |  |
| Skull & Wings | 616909321483 | |  |
| Skull & Roses | 616909321490 | |  |

Ph: 212-769-4732

A division of:
Creative Concept Instruments
2350 Broadway, Suite 1111
NY NY 10024

rozannasviolins@gmail.com
www.rozannasviolins.com

| | | | |
|---------------------|--------------|--|---|
| Skull & Knife | 616909321506 | |  |
| Skeleton Hands NEON | 616909321513 | |  |
| Skeleton Hands BONE | 616909321520 | |  |
| Guitar Pick Hand | 616909321537 | |  |
| Muse Girl BRUNETTE | 616909321544 | |  |
| Muse Girl BLOND | 616909321551 | |  |
| Guitar Girl | 616909321568 | |  |

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DESIGNER DECALS ORDERING FORM

| DECAL STYLE | QUANTITY | PRICE |
|-----------------------|----------|-------|
| SEXY LIPS RED | | |
| SEXY LIPS GREEN | | |
| SEXY LIPS MULTI COLOR | | |
| SEXY LIPS ORANGE | | |
| SEXY LIPS FUCHSIA | | |
| SKULL & ROSES | | |
| SKULL & WINGS | | |
| SKELETON HANDS (BONE) | | |
| SKELETON HANDS (NEON) | | |
| GUITAR PICK HAND | | |
| MUSE GIRL BLOND | | |
| MUSE GIRL BRUNETTE | | |
| GUITAR GIRL | | |
| TOTAL | | |

| Guitar Decals Wholesale Pricing | | | |
|---------------------------------|---------------|---------|--|
| Quantity** | Cost per unit | LIST*** | |
| 100 | \$5.00 | \$11.95 | |
| 500 | \$4.75 | \$11.95 | |
| 750 | \$4.50 | \$11.95 | |
| 1000 | \$4.25 | \$11.95 | |

** No minimum required after initial order. First time vendors may order as few as 50 on 1st order.

*** Vendors may not list decals for lower than list price on the web.

| | |
|----------------------------|--------------------------------------|
| Billing Information | |
| Purchase Order #: _____ | Contact: _____ |
| Order Date: _____ | Company: _____ |
| | Address: _____ |
| | City, State & Zip/Postal Code: _____ |
| Billing Method: _____ | Country: _____ |
| Credit Card #: _____ | Telephone: _____ |
| Expiration: _____ | Fax: _____ |
| Security Code: _____ | E-mail: _____ |

| | |
|--|--------------------------------------|
| Shipping Information (If Different) | |
| Method: _____ | Contact: _____ |
| Notes: _____ | Address: _____ |
| _____ | City, State & Zip/Postal Code: _____ |
| _____ | Country: _____ |

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