Foxhollow
Herb Farm Botanicals

Wholesale Order Form

Billing Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone Number: _____

Card Type (circle one): Visa Mastercard American Express

Card Number: _____

Expiration Date: _____

Shipping Information (if different than billing):

Name: _____

Address: _____

_____

City: _____ State: _____ Zip: _____

Card Type (circle one): Visa Mastercard American Express

Card Number: _____

Expiration Date:

Qty	Item Description	Style/Scent	Price	Ext. Cost

Subtotal:	
Shipping:	
Total:	

Order by Phone (M-F, 9 - 5 PST)
(831) 637-8626
or by Fax (24 Hours)
(831) 637-4858
Order by Mail:
180 Harbern Way ♦ Hollister, CA 95023