



## Hair Extensions by Lauren Ashley Davis

Professional Hair Extension Stylist

1317 North San Fernando Blvd. ● Burbank, CA 91504

Phone: (818) 558-7974 ● 888-4-LA-DAVIS (888-452-3284)

Website: [www.4LADAVIS.com](http://www.4LADAVIS.com) ● E-Mail: [payment@4LADAVIS.com](mailto:payment@4LADAVIS.com)

<u>Client Information</u>	<u>Application Address</u>	<u>Credit Card Address</u>

**Invoice Number: 179**

Date of Sale:	Hair Stylist: Lauren Ashley Davis	Purchase Order (Optional):
Home Phone:	Cell Phone	Office Phone
Consultation Date:	Application Date:	Application Time:
Miscellaneous:		
Email Address 1:	Email Address 2:	

**Client Hair Information**

Placement	No.	Code	Length	Texture	# of Bundles	Cost/Bundle	Bundle Total

**Total Hair Purchase**

**Payment**

Service / Product	Amount	Payment	Product Description # Price Ext
Hair Extension Bundles for Application:			
Hair Extension Perming:			
Hair Extension Application:			
Travel Time:			
Hair Extension Maintenance:			
Hair Extension Application Tip:			
Gas:			

**Total for all services:**

**Deposit**      Deposit Date:       Deposit Method:

**Balance Due**      Balance Date:       Balance Method:

<u>Credit Card 1</u>	<u>Credit Card 2</u>
Card Number: <input style="width: 90%;" type="text"/>	Card Number: <input style="width: 90%;" type="text"/>
Credit Card Issuer: <input style="width: 90%;" type="text"/>	Credit Card Issuer: <input style="width: 90%;" type="text"/>
Credit Card Expiration (Month/Year): <input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/>	Credit Card Expiration (Month/Year): <input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/>
Credit Card CVV: <input style="width: 40%;" type="text"/>	Credit Card CVV: <input style="width: 40%;" type="text"/>

**PLEASE NOTE:**

\* Credit Card Charge for Hair Extension services will appear on your Credit Card Statement as: **Accounting For Everything**  
 I authorize my Credit Card to be charged for the total amount stated above according to the card issuer agreement.

Cardholders Name: \_\_\_\_\_

Cardholders Signature: \_\_\_\_\_