

INVOICE #25-01

ORDER DATE: _____

VINYL SIGN NAME (\$TBD):

COLOR SIGN NAME (\$100.00):

BASE COLOR:

LETTER COLOR:

WHITE SIGN NAME (\$40.00):

How many miles from the Barefoot Bar?

What direction to the names located?

CONTACT INFORMATION

NAME:

ADDRESS:

CITY, STATE, ZIP:

EMAIL:

PHONE NUMBER:

Make all checks payable to:

Okoboji Barz PO Box 229 Okoboji, IA 51355 Questions?

Mark Stover (712) 332-7303 mark.stover@parksmarina.com

THANK YOU FOR YOUR BUSINESS!