

# \$100 Window Film Gift Certificate

Customer Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

Jordan's Customer ID# \_\_\_\_\_

Date of Installation \_\_\_\_\_

Total Square Feet \_\_\_\_\_

Total Cost \_\_\_\_\_

Installer Initials \_\_\_\_\_