

NAME:		BIRTHDAY:	ANNIV:	:
CELL #:	EMA	AIL:	HOME: _	
ADDRESS:		CITY:	STATE:	_ZIP:
	Eye Color Sk Normal/Oily (circle one) HOSTE	•		
<u> </u>	you would change about your see you currently most interested			
Who may I conta	ct about gift-giving ideas? NAM	ИЕ:	CELL:	<u> </u>
	fri	ends with Be	nefits!	

FREE Travel-Size Eye Makeup Remover or mini Lash Love Mascara

for completing this list of dynamic women!

Enthusiastic/FunLoving	Competitive/Loves to Win	People Person/Connector
Name	Name	Name
Cell #	Cell #	Cell #
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