



Tokyo Scissors Sharpening Order Form

Name _____

Address _____

City _____

State & Zip Code _____

Phone _____

Email _____

List Brand or Model Name of Each Shear _____

Quantity _____ @ \$25.00 each = Total \$ _____

Visa/MasterCard only CC # _____



Exp. _____ / _____

Or enclose a check made payable to Tokyo.

Print and fill out this form, or write it on a piece of paper and enclose with your shears.

Be sure to use a padded envelope or a small box with bubble wrap for protection.

We suggest you get a tracking number and insurance.

Ship to

Tokyo Scissors
11 Mirta Court
Jackson, NJ 08527
732 833 8270