

# FIND YOUR PERFECT Match

Name: \_\_\_\_\_ Cell#: \_\_\_\_\_

1. Do you have a problem finding the perfect shade or type of foundation? **Yes** **No**

2. What is your skin tone? **Ivory** **Beige** **Bronze**

3. What is most important to you when selecting foundation?

**Sheer Coverage** **Sun Protection** **Moisturization** **Full Coverage**  
**Ease of Application** **Oil Control**

4. What is your skin type? **Dry** **Normal** **Combination** **Oily**

5. Would you love if someone could help you find the perfect foundation match that blends seamlessly with your skin tone, has a smooth feel without settling into fine lines, plus is long wearing with a humidity and sweat resistant formula? **Yes** **No**



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