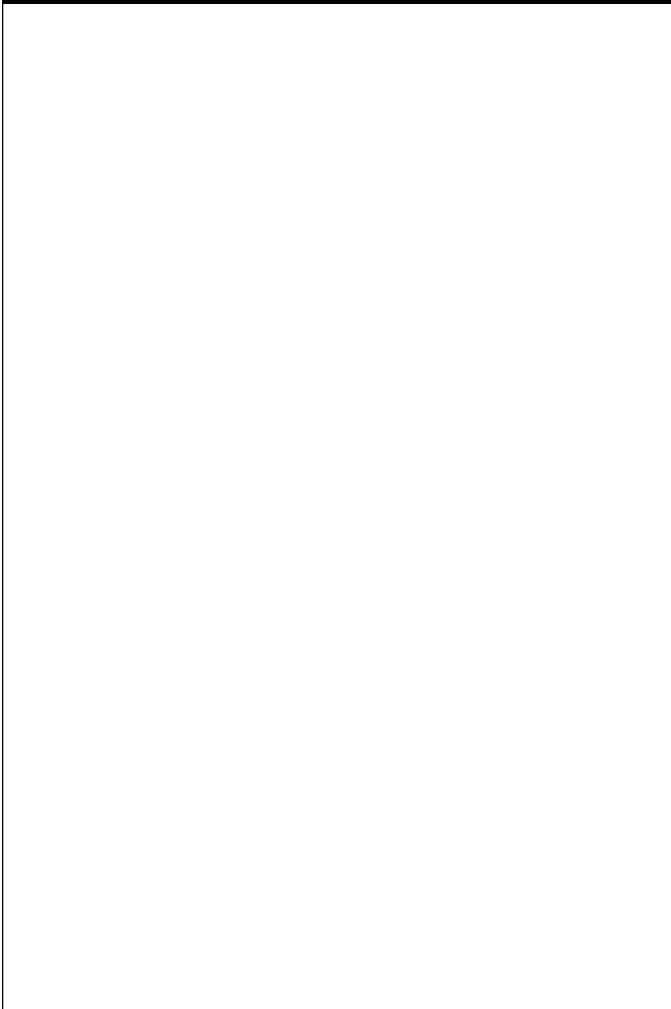
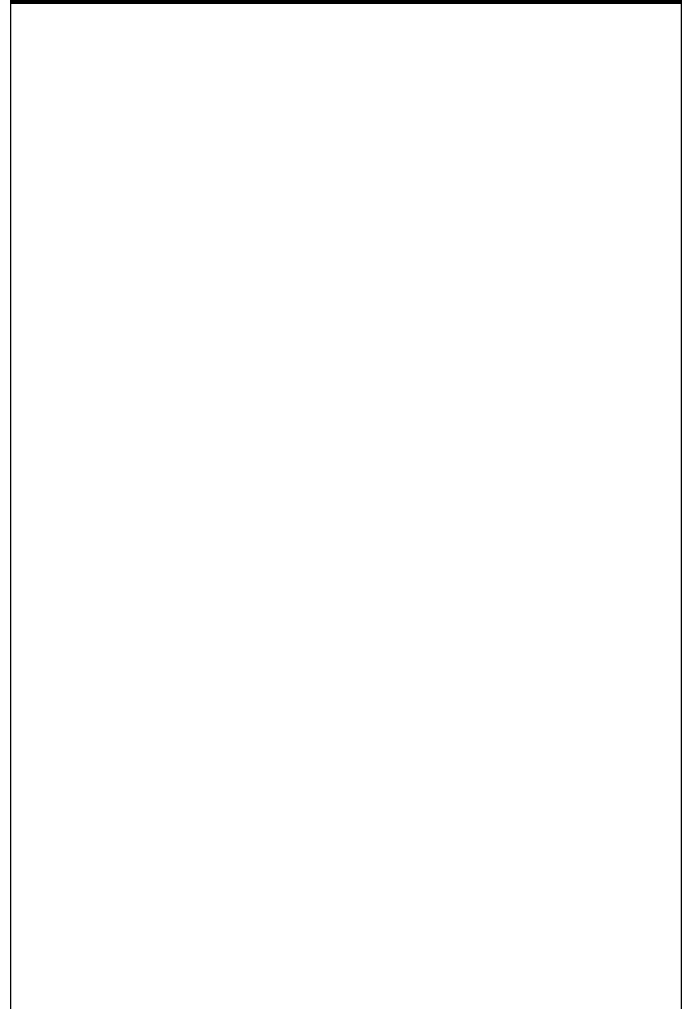


MK *Signature* m a k e o v e r

before



after



Independent Beauty Consultant

Model _____
Occupation _____
Foundation Shade _____
Eyes _____
Cheek _____
Lips _____
Check overall affect acheived
 Natural Classic Dramatic
Date _____

What do you like best? _____

What technique(s) created the most change?

How does your skin feel? _____
