Order Form

Shipping Information:				
Name:				
Address:				
City/State/Zip:	City/State/Zip:			
Phone Number:				
	Merchandise Selecti	ion		
Item# Qty	Description	Price	Total Amount	
	,		,	
		Shipping:	6.99	
Payment Information		Grand Total		
Enclosed is the full amount of my orde	er \$	Order payable to:		
Paid by: (please check one)			@C1 COn. 1-	
□Personal Check □Cash □Money (Order	Bec P.O. Pasad	The Gift Garden Becky Johnson P.O. Box 91148 Pasadena, CA 91109	
		e-mail: thegi ^s	e-mail: thegiftgarden@hotmail.com	