

## BILL TO:

Customer #:	Catalog #:	← Printed on the back of your catalog or gift list
Customer Name:		
Address:		Apt. #:
City:	State:	ZIP code:
Phone: (      )	Email:	

## Ship To:

Name:		Phone: (      )
Address:		Apt. #:
City:	State:	ZIP code:
Gift# :	Gift Name:	
Requested Arrival Date: <input type="checkbox"/> Thanksgiving <input type="checkbox"/> Chanukkah <input type="checkbox"/> Christmas <input type="checkbox"/> Other Date ____/____/____		Price: \$
Add Gift Message:		

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## Payment Method:

<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> Amex		<b>SUBTOTAL</b>	\$
<input type="checkbox"/> Check or Money Order payable to <b>Dundee Groves</b>		Total number of U.S.A. items _____ x \$11.99 S&H	\$
Card #:	Exp. Date: ____/____	Total number of Canadian items _____ x \$24.99 S&H	\$
Signature:	Today's Date: ____/____/____	<b>TOTAL</b>	\$



**1-800-294-2266**  
**dundeegroves.com**

Dundee Groves  
PO Box 829  
Dundee FL 33838

**Remember** – When ordering, please be sure to double-check all addresses and phone numbers. Postal and delivery services will not forward. We can only guarantee delivery to the addresses given.

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