



# BLOOMS OF HOPE

## Hanging Basket Flower Sale Order Form

Purchaser Name (Print Name): \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### I would like to purchase:

\_\_\_\_\_ # of 10" Green Hanging Baskets at \$23.99 each

\_\_\_\_\_ # of 12" Tan Hanging Baskets at \$32.99 each

\_\_\_\_\_ Total # of baskets (*you will receive one voucher for each basket*)

Total Paid \$ \_\_\_\_\_

*I do not wish to purchase a hanging basket but I would like to make a donation of \$ \_\_\_\_\_ to this worthwhile cause.*

*Please make checks payable to **Hospice & Palliative Care***

**Please charge my credit card:**  Visa  MasterCard  Discover

Name on Card: \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ 3-Digit Sec. Code: \_\_\_\_\_

***Order by May 1st to receive vouchers by Mother's Day, May 11th. After May 1st, the vouchers will be mailed as orders are received.***