

**WEDNESDAY  
DECEMBER 20. 2017**

**Rose**



**D A Y**

**ORDER DATES OCT 10-NOV 15**

Rose Day Rep: \_\_\_\_\_

Company: \_\_\_\_\_

*Tax-deductible contribution for each dozen purchased is \$16.25*

**CREDIT CARD AUTHORIZATION FORM**

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email (optional): \_\_\_\_\_

Credit Card: ☐ American Express ☐ MasterCard ☐ Visa

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Total: \_\_\_\_\_

