

Participants Name: _____ (Make Check payable to Participant)



Phone #: _____ **Address:** _____

Daisy Dessert Plates
Set of 4



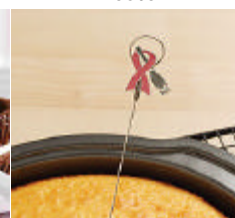
Dots Microfiber
Towel (1)



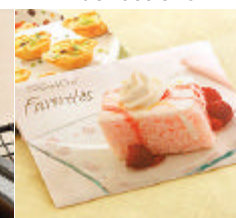
Pink Flexible Scraper



Cake
Tester



Recipe Cards (5)
Collections



ORDER FORM

(Price includes \$1.00
for group shipping &
8.75% for tax)

Name	_____	# _____ X \$24.75 =	# _____ X \$10.62 =	# _____ X \$8.98 =	# _____ X \$5.18 =	# _____ X \$6.81 =	CASH or Check # _____
Phone	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Name	_____	# _____ X \$24.75 =	# _____ X \$10.62 =	# _____ X \$8.98 =	# _____ X \$5.18 =	# _____ X \$6.81 =	CASH or Check # _____
Phone	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Name	_____	# _____ X \$24.75 =	# _____ X \$10.62 =	# _____ X \$8.98 =	# _____ X \$5.18 =	# _____ X \$6.81 =	CASH or Check # _____
Phone	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

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Phone	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

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Phone	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____