

## Angels Foster Care 2018 Holiday Ornament Order Form

### Donor Information

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

Address: \_\_\_\_\_

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

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

### Credit Card Information

Name on card: \_\_\_\_\_

Account No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Sec. Code: \_\_\_\_\_

Billing Address (if different than above): \_\_\_\_\_

Number of ornaments ordered: \_\_\_\_\_

Total donation amount: \_\_\_\_\_

Gift Recipient #1 \_\_\_\_\_

Address: \_\_\_\_\_

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

Donor message:

\_\_\_\_\_  
\_\_\_\_\_

Gift Recipient #2 \_\_\_\_\_

Address: \_\_\_\_\_

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

Donor message:

\_\_\_\_\_  
\_\_\_\_\_

Gift Recipient #3 \_\_\_\_\_

Address: \_\_\_\_\_

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

Donor message:

\_\_\_\_\_  
\_\_\_\_\_