



2755 Penfield Rd., Fairport, NY 14450

Phone: (585) 377-9810

FAX: (585) 377-2274 (please call to confirm FAX)

Gift Card Fundraising Program
Order Form

Today's Date: _____ Date of Pick-up: _____ Salesperson's Initials: _____

Account Name (organization): _____

Contact Person: _____ phone # _____

Face Value	Quantity	x Your Cost Each	= Total Due
\$ 20.00		\$ 16.00	

We ask for 2-business days notice on all Gift Card orders to have time to get them ready for you. Thank You!

Gift Cards must be returned within 14 days for refund. A refund check will be issued to your organization for the amount paid for the returned gift cards.

Return By Date: _____

Note: These specially marked Gift Cards purchased through our Fundraising programs are redeemable for retail purchases only. They cannot be used for paying invoices, previous purchases, landscape services, special orders, hardscape products, delivery charges, or wholesale purchases. They are not redeemable for cash and will not be replaced if lost or stolen. Gift Cards must be paid for at the time of pick-up. (02/10)

.....

Office Use Only:

Date Returned: _____ Check Issued Date: _____ Check # _____

Face Value	Quantity Returned	x Your Cost Each	= Total Refund Due
\$ 20.00		\$ 16.00	