



EVENT PRINT ORDER FORM

Date of Order: _____

Name: _____

Phone: Home _____

Address: _____

Work _____

Event : **St. Monica School 50th Reunion**

Date of Event : **4-22-06**

TO ORDER: Use the File Proof number to indicate your selection. Prints are mailed unless instructed otherwise. An additional \$3.00 charge for postage and handling should be added to your order .

Print No.	Size	Qty.	Special Instructions	Amount
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Subtotal: _____

8.25% Sales Tax: _____

If mailed add \$3.00: _____

TOTAL ENCLOSED: _____

8x10	\$21.00
5x7	16.00
4x5	12.00
Wallets(8)	22.00

Make check payable to **Edward L. Holmberg**. Mail your order to address above

Payment Method (circle one): Cash Check Money Order VISA Master Card

Cardholder's Name: _____

Account No. _____ Exp. Date _____

Authorized Signature _____

*** Portraits are the most special gift you can give to loved ones and friends ***

The Images are © Please do not Copy

Thank You For Your Order!