

**SIMPSON UNITED METHODIST CHURCH
GIFT CARD ORDER FORM**

NAME: _____ **PHONE NO.** _____

TOTAL ORDER AMOUNT: _____ **TOTAL # OF GIFT CARDS** _____

ORDER DATE: _____

PRODUCT	DENOMINATION	QTY	TOTAL
1. _____	_____	_____	\$ _____
2. _____	_____	_____	\$ _____
3. _____	_____	_____	\$ _____
4. _____	_____	_____	\$ _____
5. _____	_____	_____	\$ _____
6. _____	_____	_____	\$ _____
7. _____	_____	_____	\$ _____
8. _____	_____	_____	\$ _____
9. _____	_____	_____	\$ _____
10. _____	_____	_____	\$ _____
11. _____	_____	_____	\$ _____
12. _____	_____	_____	\$ _____

Contact: Sue DeFilippo suzd2@verizon.net
For the most updated list google shopwithscrip retailers pd
Make checks payable to SUMC.

If paying by credit card please fill out below:

Visa ___ Mastercard ___

Name on card _____

Billing Address _____

credit card # _____ exp. date _____

cvc _____