



	Valentine Gra	am Order Form 2017
То:		То:
From:		From:
Message:		Message:
Recipient's Name:		Recipient's Name:
HR Teacher: Grade:	:	HR Teacher: Grade:
Circle one Option only: Options: A B C D	Circle one Date only: Mon. 13 th Tues. 14 th	Circle one Option only: Options: A B C D Circle one Date only: Mon. 13 th Tues. 14 th
Option: E Tues. 14 th (ONLY Delivery date for this option)		Option: E Tues. 14 th (ONLY Delivery date for this option)
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Please fill out a separate box before Tuesday February 7 th .		day. Return this form to your homeroom teacher, or to Vicki Martin or account.
Name:		Phone:
Homeroom Teacher:		Grade:
Signature authorizing to bill a	ccount (\$5.00 minimum)	
Options:		Quantity Total Amount
A= Candy Gram	\$.50 each	
B= Candy Bag	\$ 2.50 each	
C= Plush Animal Friend	\$ 5.00 each	
D= Sports Treat Bag	\$ 7.00 each	
E= Rose	\$ 6.00 each	
		TOTAL