

Jam Order form

Name: _____

Jam Availability:

Flavor	# of jars requested	Cost \$5.00	Extended Price
Blackberry	_____		_____
Strawberry	_____		_____
Raspberry	_____		_____
Triple Berry blend	_____		_____
Black n Blueberry	_____		_____
Apricot	_____		_____
Apricot w pineapple	_____		_____
Orange Marmalade	_____		_____
Totals	_____	x\$5.00	_____

Keep this portion

Jam Order form

Name: _____

Address: _____

Telephone: _____

Jam Availability:

Flavor	# of jars requested	Cost \$5.00	Extended Price
Blackberry	_____		_____
Strawberry	_____		_____
Raspberry	_____		_____
Triple Berry blend	_____		_____
Black n Blueberry	_____		_____
Apricot	_____		_____
Apricot w pineapple	_____		_____
Orange Marmalade	_____		_____
Totals	_____	x\$5.00	_____

_____ I will be at the October Grand Encampment/Canton Sessions

_____ I will not be at the October Grand Encampment/Canton Sessions

I am paying by _____

Mail with payment to

Grand Patriarch – Debbie Shuler
 1411 Four Oaks Rd.
 San Jose, CA 95131
debjeanshuler@gmail.com
 408-316-5477