nd on form

order torm		Name
	To:	Address
	Ship	City/State/ZIP
BGGE Gift Shop	0,	Phone Number () e-mail:
Step 1: Submit your order to		Name
http://www.bgge.com/contact_us.html	To:	Address
Step 2: I'll contact you to discuss order details.	Bill T	City/State/ZIP
Step 3: Make payment.		Phone Number () e-mail:

Please Print

LIST MERCHANDISE (Please Print Clearly)								
ltem #	Qty.	Description	Color/Size	Price	Total Amount			
	Do y	you know someone who would like our catalog?	М	erchandise Total				
Name				Sales Tax (if applicable)				
Address				Shipping				
Citv/State/ZI	Р			Total Amount				

Enclosed is the full amount of my order \$_ Paid by: (Check one please)

Personal Check Doney Order Certified Check (Make checks payable to addressee on top of order form)

Freight charges apply within the continental United States. Orders shipping outside the continental United States may incur additional charges.	CHARGE this order to my: Mastercard Card Number	🗅 Visa	American Express	Discover
	Expiration Date Signature		(required)	

Guarantee: Every product you buy from this catalog must be free of defects or you may return it immediately for replacement.

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