Date Order Received:	
Date Order Due:	
Date Order Shipped:	- V. II - MX

## I would like to order the following cards:

Any —	4 for \$7.00,	6 for \$10.00,	10 for \$16.00,	20 for \$3	20 for \$30.00	
1	Happy Birthday	16	Wild Flowers	31	Spring Bonnet	
2	Birthday Wishes	17	Tulips	32	Always	
3	Birthday Fun (Blue)	18	Blossoms	33	Love	
4	Birthday Fun (Gree	n) 19	Flamingos	34	Be Mine	
5	Thank You (Blue)	20	Palm Trees	35	Happy Valentines Day	
6	Thank You (Purple)	21	Flip Flops	36	Much Love	
7	Thank You (Red)	22	Cocktails	37	Happy Holidays	
8	THaNK You	23	Golf Cart (Blue)	38	Holiday Wishes	
9	Get Well Soon	24	Golf Clubs (Pink)	39	Peace on Earth	
10	Thinking of You	25	Golf Clubs (Blue)	40	Christmas Star	
11	Sympathy	26	Golf Cart (Green)	41	Joy	
12	Time to Celebrate	27	Shoe (Brown)	42	Fall Leaves	
13	Decorative	28	Shoe (Black)	43	Happy Thanksgiving	
14	New Baby	29	Accessories	44	Boo!	
15	Daisy	30	Purse	45	Happy Halloween	
De	corative Greeting Car	d Organizer Box	\$40.00			

Some cards may require extra postage

includes variety of 16 cards (Fun, Occasion and Holiday Cards)

6043 Interstate Circle Cincinnati, OH 45242 (513) 247-0056 www.inreturn.org



InRETURN is a non-profit 501(c)3 organization Federal Tax ID: 20-2208676

## Greeting Card Program



## **Order Form**

**Yes,** I will help InRETURN employ and enrich the lives of Brain Injury Survivors!

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Any —	4 for \$7.00,	6 for \$10.00,	10 for \$16.00	, 20 for	\$30.00			
BILLING	INFORMATION:	PLEASE PRINT						
Name:	e: Phone Number:							
Mailing Ad	ldress:							
City:				State:	Zip:			
Email:								
County (Ol	H only):							
Ship t	o me at the above addr	ess for the added \$5.00	)l will pick up a	at InRETURN (all	ow 5 days after receipt of order)			
	TOTAL FROM	BACKSIDE (Pric	e includes OH sales	s tax):				
	4 cards for \$			<i>y</i> .				
	6 cards for \$1	0						
	10 cards for \$1	6						
	20 cards for \$3	Amount Due		\$				
		Shipping and	Handling \$5.00	+				
	Donation (every \$ counts)			+				
		TOTAL ENC	LOSED	\$				
PAYMENT	INFORMATION							
Check	Cash VIS	SA MasterCard	American Expr	ess Disc	over			
Card Numb	oer:			Ex	piration Date:			
Signature:			Name on Card:					
Special Inst	tructions:							