

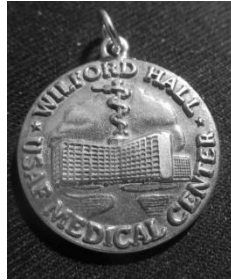
Commemorative Wilford Hall Medical Center Charm

Order Form

www.wilfordhallauxiliary.com
wilfordhallauxiliary@yahoo.com



Large Charm (1")



Small Charm (1/2")



Customer Information:

Name: _____

Address: _____

E-Mail: _____ **Phone:** _____

Order Information:

Order Date: _____

Commemorative Item:	Qty:	Total:
Large Charm (\$40 each)	_____	\$ _____
Small Charm (\$20 each)	_____	\$ _____

Shipping/Handling:

1 – 3 Charms.....\$2.50	Shipping/Handling: \$ _____
3 – 6 Charms.....\$5.00	Total Cost: \$ _____
7+ Charms.....\$7.50	

****Payment must accompany order request.****

Payment Method:

WHA USE ONLY

Payment Method (Circle) Cash Check # _____

Amount: _____ Date: _____

Received By: _____

Ship Date: _____

Mail Order Form To:

Wilford Hall Auxiliary
 PO Box 276554
 San Antonio, TX 78227