MAIL ORDER FORM

Name: _____

Address: _____

_____

City/St. _____ Zip: _____

Phone: _____ E-mail: _____

QTY.	ITEM	COST (Each)	TOTAL COST
		TOTAL	

Mailing Instructions

1. Make check payable to ROXANNE JARVIS only. Checks made payable to Tolefairie will not be accepted.
2. Place order form and payment together addressed to:
   Roxanne Jarvis, 9 Bothwell Garth, Nottingham, Maryland 21236

In order to figure out shipping & handling, please use our website cart. Place your order and it will calculate postage.