

## Order Form for Roz's Place

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_State\_\_\_\_\_Zip\_\_\_\_\_

E-mail Address\_\_\_\_\_Date\_\_\_\_\_

Item #	Description or Title	Quantity	Cost	Weight	Total
<b>TOTALS:</b>					

**Thank you for your order**

**Mail your order to:**

**Pete Jefferson  
7259 W. 500 N.  
McCordsville, IN 46055**

**Please Reserve your items first by Emailing Pete at: [pete\\_jefferson@yahoo.com](mailto:pete_jefferson@yahoo.com)**