



PLEASE ARRANGE TO HAVE A NUTTER'S TRAY SHIPPED TO:		TRAY LETTER	QTY	PRICE
First Name: _____	Last Name: _____			
Address: _____				
City: _____	Province: _____			
Postal Code: _____	Phone: _____	Requested Delivery Date: _____		
Message on Card: _____				

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Senders Information
Name: _____
Address: _____
City: _____
Province: _____ Postal Code: _____
E-mail: _____
Phone: _____ Fax: _____
Method of Payment
<p>You will be contacted as to the method of payment and FREIGHT COSTS</p> <p>Please print off and fax to the Nutter's store nearest you or to Fax No. 403-529-6507</p>
Billing Address (If Different than Above)
Name: _____ Company: _____
Address: _____
City: _____
Province: _____ Postal Code: _____
E-mail: _____
Phone (Required): _____

TOTAL	
APPLICABLE TAXES (PST & GST)	
FINAL TOTAL BEFORE SHIPPING	