

1800 St. George Road | Evansville, IN 47711 | (812) 477-5316 | www.sunsetevansvill

le.com	f

	2	018 Floral Order F	orm			
For:						
For: Name	can select one, two or three se occasion date, you can select	Name ram is for bronze or granite vases alro easonal bouquets to be placed on the which bouquet you would like for the	For: Name granite vases already attached to markers or monuments, or for mausoleum crypts. Yo be placed on the first month of the season. Or if instead of a season you select a speci would like for that special occasion. Mark your selection below, to be placed as long a and November 1. Winter decoration order forms will be mailed in October.			
Place a checkmark next to Placement Fime. Select either the Season or write in a Special Occasion Date.	Flowers are placed during the SPRING March, April, May or Special Occasion Date: Bouquet # Mausoleum #	SUMMER June, July, August or Special Occasion Date: Bouquet # Mausoleum #	FALL Sept., Oc or Specia	at., Nov. al Occasion ————	15 days prior to date.	
Place a checkmark next to Bouquet # or Mausoleum # for each Placement Time in Step 1. Above, write in the Bouquet # or Mausoleum #. For example: Bouquet				Bouquet#4 gazer w/Yellow d Hydrangea	Mausoleum Selection Mausoleum #9 Red Rose Galla Lily	
#2, or Mausoleum #9 from the selection to the right.	Bouquet#5 Purple Peony w/Pink and Cream Orchids	Bourquet#3 Red, White & Blue Mix Sunflower and	ijust #7/	Bouquet #8	Mausoleum #10 YellowRose	
STEP 3: Select Fee for Number of Placements Selected.	ORDER SUMMARY & I 1 Placement \$39 Your Name (Please Print) Address	PURCHASER INFORMATION ☐ 2 Placements \$78	□ 3 Placeme \$117	nts		
Spring clean-up starts March 1 through March 5. Fall clean-up starts November 1 through November 15. Cemetery/ Funeral Home is not esponsible for lost or missing flowers once placed in vase.	Phone Email Address METHOD OF PAYMENT					
	☐ Check Enclosed OR ☐ Money Order Enclosed (Check One) Please make payable to cemetery listed above.		e)	☐ VISA ☐ MasterCard ☐ Discover	Order Total: \$ All Sales Tax Included	
	Credit Card Number: Expiration Date: Signature:		on Date:	American Express 3 digit security code on back of card		
	OFFICE USE GARDE	EN: LOT:	SPACE:	BLDG:	FLOOR:	

__ LOT: ___

_ CRYPT:_

_____ SPACE: ______ BLDG:_____ FLOOR:

GARDEN: _

CORRIDOR:-

ONLY