The Wildlife Group **ORDER FORM**

Name:_____ Shipping Address (If Different)
Address:_____ _____
City:_____ _____
State/ZIP:_____ _____
Phone Number:_____ _____
Email Address:_____@_____

Plant Description	Quantity	Price Each	Total

Subtotal $	
Tax $	
Shipping $	
Total $	

Paid by: □ Cash
□ Check □ Account □ Credit Card

Shipping Information:

_____
_____
_____
_____

PHONE 1-800-221-9703 FAX 334-724-9300