



I would like you to send _____ cards on my behalf at \$18 each (or \$15 each for 5 or more cards). Total: \$ _____

PAYMENT METHOD:

- My/Our check is enclosed, payable to the **JEWISH HOME**.
- Please charge my/our credit card. VISA Mastercard

Credit card number _____ Exp. date _____

BILLING ADDRESS:

Name as it appears on card _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Please print clearly as the Jewish Home is not responsible for incorrect address information.

I would like my card(s) to be signed from: _____

Send my card(s) to the following name(s) and address(es):

1. Name _____
 Address _____
 City _____ State _____ Zip _____
 Card # _____ Message on card _____

4. Name _____
 Address _____
 City _____ State _____ Zip _____
 Card # _____ Message on card _____

2. Name _____
 Address _____
 City _____ State _____ Zip _____
 Card # _____ Message on card _____

5. Name _____
 Address _____
 City _____ State _____ Zip _____
 Card # _____ Message on card _____

3. Name _____
 Address _____
 City _____ State _____ Zip _____
 Card # _____ Message on card _____

6. Name _____
 Address _____
 City _____ State _____ Zip _____
 Card # _____ Message on card _____

If necessary, please include an additional page of names, addresses, your card selections and messages.

How to place your order:

Mail your form in the enclosed envelope:
Jewish Home Development Department
302 Silver Avenue
San Francisco, CA 94112

Or:
Fax your form to: 415.406.1565
Call us at: 415.406.1107
Order online: www.jhsf.org/cards