



CHRISTMAS WREATH PROGRAM ORDER FORM
Orders must be received by Tuesday, Nov. 1, 2011

Ordered by: (please print)

Name _____

Address _____

Phone ____ (____) _____

E-mail _____
 (optional, provide if you would like to be notified electronically next year)

Name of person(s) in memory of and approximate date of death: \$40 each

TOTAL AMOUNT DUE _____

Payment Method:

- Check – Please make check payable to City of Mesa.
- Credit Card– All credit card transactions must physically be processed in the Cemetery Office. Credit cards cannot be accepted by mail, phone, or fax.
- **WE No Longer Accept Cash**

Mail check to:

Mesa Cemetery
 P.O. Box 1466
 Mesa, AZ 85211

or Deliver payment to:

Mesa Cemetery
 1212 N. Center St.
 Mesa, AZ 85201

Office Use Only: Receipt _____ Date _____
