



GIFT CARD & SCRIP ORDER FORM



Name: _____

Date: _____

The stores below donate between 3 - 20% to MCS when you shop with these cards. Please consider setting up **automatic monthly** orders from the list below. This is an easy way to help MCS.

Merchant	Denomination of card/scrip	# ordered	Total \$ Amount
Albertsons/Vons/Safeway	\$25		
Amazon	\$25/\$100		
Bath and Body Works	\$10		
Bed, Bath & Beyond	\$25		
Best Buy	\$25		
Blenders In the Grass	\$25		
California Pizza Kitchen	\$25		
Chaucer's Booksellers	\$25		
Chili's	\$25		
Coffee Bean & Tea Leaf	\$25		
Cold Stone Creamery	\$10		
CVS Pharmacy	\$25		
Gap/Banana Rep/Old Navy	\$25		
Gelson's	\$50/\$100		
Groupon	\$25		
Home Depot	\$25		
iTunes	\$15		
Macy's	\$25		
Michael's	\$25		
Nordstrom	\$25		
REI	\$25		
Ross	\$25		
Sprouts	\$50		
Starbucks	\$10/\$25		
Target	\$25		
Whole Foods	\$25/\$100		
Williams-Sonoma/Pottery Barr	\$25		
Zappos.com	\$25		

Total order \$ _____

- I would like to receive these gift cards monthly.
 - I will pay by check when cards are available (preferred method)
- Check # _____ Date _____ Rec'd by _____
- Please charge my credit card below
- Circle one: Visa / MC CC #: _____
- CC Exp. Date _____ CVV# _____ (3 digits on the back)
- Street # _____ Zip code _____ (of your billing address)

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