## Harrison County Hospital Foundation Fall Mum Fundraiser



Preorder your hardy mums today!

8" pots for \$8/each available in Yellow, Red, Orange, Purple, Bronze, White & Pink 12" patio pots for \$20/each available in Yellow, Red, Orange, Purple, Bronze

To place an order call 812-738-8762 or stop by the HCH Foundation Gift Shop. Visit us on line at hchin.org/our-foundation for more information.

Orders Due: Wednesday, September 4

**Pick Up:** Wednesday, September 11 from 3 to 5 p.m.

Pick Up Location: Harrison County Hospital (behind the hospital at the loading dock)

Payment by credit card, check, or cash is due when placing your order

Checks should be made payable to HCHF

Gifts to the HCHF support improved facilities and equipment, community wellness, educational programs, and annual scholarships to students.





12"containers



8" containers



8" containers



8" containers

Customer Name, phone, email	Yellow		Red		Orange		Purple		Bronze		White 8" only 8"	Pink 8" only	Quantity	Total Cost	Paid
8" POT (\$8) OR 12" PATIO POT (\$20)		8" 12"		8" 12"		8" 12"		12"	8" 12"						
3 . 5 . (\$5) 51. 12	\$8	\$20	\$8	\$20	\$8	\$20	8" \$8		\$8	\$20	\$8	\$8			
											·				
TOTAL															

## Harrison County Hospital Foundation Fall Mum Order Buyer Name \_\_\_\_\_\_ Buyer Phone Number (\_\_\_\_\_) Buyer **Zip Code** VISA, Master card, or Discover Card Number (NO AMERICAN EXPRESS) Expiration Date \_\_\_\_\_/ 3 Digit Security Code \_\_\_\_\_ Mums x \$20 = Mums x \$8 = \_\_\_\_\_ Total charged to credit card \_\_\_\_\_ Seller Name & phone Harrison County Hospital Foundation Fall Mum Order Buyer Name \_\_\_\_\_ Buyer Phone Number (\_\_\_\_\_) Buyer **Zip Code** \_\_\_\_\_ VISA, Master card, or Discover Card Number (NO AMERICAN EXPRESS) Expiration Date / 3 Digit Security Code \_\_\_\_\_ Mums x \$20 = \_\_\_\_\_ Mums x \$8 = \_\_\_\_\_ Total charged to credit card \_\_\_\_\_

Seller Name & phone\_\_\_\_\_

Harrison County Hospital Foundation Fall Mum Order					
Buyer Name					
Buyer Phone Number ()					
Buyer <b>Zip Code</b>					
VISA, Master card, or Discover Card Number (NO AMERICAN EXPRESS)					
Expiration Date/ 3 Digit Security Code					
Mums x \$20 =					
Mums x \$8 =					
Total charged to credit card					
Seller Name & phone					
Harrison County Hospital Foundation Fall Mum Order  Buyer Name					
Buyer Phone Number ()					
Buyer <b>Zip Code</b>					
VISA, Master card, or Discover Card Number (NO AMERICAN EXPRESS)					
Expiration Date/ 3 Digit Security Code					
Mums x \$20 =					
Mums x \$8 =					
Total charged to credit card					

Seller Name & phone