

MAGNIFICAT CD ORDER FORM

\$8.00 EACH—MAKE CHECKS PAYABLE TO: *MAGNIFICAT GREENSBURG*

SPEAKER'S NAME _____ **QUANTITY** _____

AMOUNT ENCLOSED _____

NAME _____
(Please print clearly)

ADDRESS _____

CITY, STATE, ZIP _____

DATE _____ **PHONE NUMBER** _____

Mail form and payment to:
Karen Douglas, 617 Cabin Hill Dr. Apt 11A Greensburg,
PA 15601-1636