

Chocolate Thursday's Cookbook Order Form

Please fill out completely and legibly:

Name:	_____
Address:	_____

City:	_____ State: _____ Zip: _____
Phone Number: (_____) _____	
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Quantity Ordered: _____

Price: \$10 per book

S&H: \$2 for first book

\$1 for each additional book

Total amount enclosed: _____

Please send this order form along with a check made payable to **KBMF** and mail it to:

KATHRYN BENDER MEMORIAL FOUNDATION
P.O. BOX 52
NAPERVILLE, IL 60566