

American Legion Auxiliary  
Department of Florida  
P.O. Box 547917  
Orlando, Fl. 32854-7917

Poppy Order Form (One Distribution Only!)

Date: \_\_\_\_\_

ORDER MUST REACH DEPARTMENT OFFICE 90 DAYS PRIOR TO UNIT POPPY DAY!

Unit Location \_\_\_\_\_ Unit/Dist# \_\_\_\_\_

Number of Poppies \_\_\_\_\_ Cost \$ \_\_\_\_\_ Shipping \$ \_\_\_\_\_ Date of Poppy Distribution \_\_\_\_/\_\_\_\_/\_\_\_\_

\*IS YOUR POPPY DISTRIBUTION DONE THROUGH THE MAIL? Yes or No If yes, date of mailing? \_\_\_\_\_

If Unit does not plan to distribute Poppies and they are only for display or arrangements check here. \_\_\_\_  
(Do not put a date above for distribute and note the Unit cannot distribute these poppies for donations!)

MAIL POPPIES TO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City Zipcode

PHONE # \_\_\_\_\_  
(AREA CODE)

I, the undersigned, agree to pay the American Legion Auxiliary, Department of Florida Twenty-Five percent (25%) of the net proceeds of poppy day within Thirty (30) days following the Unit's Poppy day.

\_\_\_\_\_  
Signed By Unit President or Secretary

UNIT COST OF POPPIES:		Shipping Cost: Over 7000 - Call for Price	
1,000 -	\$75.00	6001-7000	\$18.00
500 -	\$37.50	5001-6000	\$15.00
250 -	\$18.75	4001-5000	\$12.00
		3001-4000	\$11.50
		2001-3000	\$11.00
		1001-2000	\$9.50
		501-1000	\$6.75
		251-500	\$6.25
		250	\$4.50

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Unit # \_\_\_\_\_ Pack Date: \_\_\_\_\_ Ship Date: \_\_\_\_\_

Quantity Shipped: \_\_\_\_\_ Packed by: \_\_\_\_\_

Person Shipped to, if other than name listed above: \_\_\_\_\_

To be completed by VAMC Representative and returned to Department Headquarters.