## 2015

## **Sentinel Chicken Order Form**

Southern: Please return by February 10, 2015 Northern: Please return by April 1, 2015

ency Name:	Agency Code:	
lered by:		
Please type or print your nar	ne	
ferred email address:		
Northern Region: (Haley's)		
Pick-up date: April 21 <sup>st</sup> , 2015 in Modesto		
Red Leg Horn:		
Total number of chickens requested: x \$	66.25 = \$	
Southern Region: (Haley's)		
Pick-up date: March 10 <sup>th</sup> , 2015 in Modesto		
Red Leg Horn:		
Total number of chickens requested: x \$	66.25 = \$	
Total Payment Due: \$		
Payment: Check: Cred	t Card:	
Credit Card Number:	Exp:	Security Code:
Cardholder Name:		
Check here if your billing address is the san	ne as your district add	dress. If not, fill out belo
Address:		
City, State, Zip:		

## Fax email or mail to:

MVCAC 1 Capitol Mall, Suite 320 Sacramento, CA 95814 P: 916-440-0826 F: 916-444-7462 sspencer@amgroup.us