Pre-Order Payment Form

Child’s Name: ................................................................. Class: ..............

Parent’s Contact Number: ...........................................

$1 from every book sold will be donated to the Sandra Jones Centre

Method of Payment: □ Cash (exact amount)

□ Direct debit

BSB: 804002 A/C No. 356091

A/c Name: Julieann M Wallace

(Please provide family name and class as a reference)

DARTH:

Happiness comes from within

□ No. of copies @ $14.00 each =

WITH ALL OF MY HEART:

A parent's endless love – spaces for your own photos or mementos

□ No. of copies @ $14.00 each =

VANILLA SWIRL:

A little girl and her seriously ill mother, holding onto hope.

□ No. of copies @ $14.00 each =

LILLY’S LOLLIES:

The power of sharing.

□ No. of copies @ $14.00 each =

THE BLESSING:

(available later - in print production)

A Christmas story of compassion.

□ No. of copies @ $14.00 each =

TOTAL: ...............