

Poppy Order Form

Due no later than October 20th

Directions

Poppy Orders are due to the American Legion Auxiliary Department of Iowa by October 20 each year. Retain a copy of this order for your records.

Mail completed form to:

American Legion Auxiliary Department of Iowa, 720 Lyon St., Des Moines, IA 50309



Poppies will be delivered **starting March 1**; orders are processed in the order they are received. Check your order upon receipt and compare what is received to your order form.

Issues with your order? Don't have your order by April 15?
Contact the American Legion Auxiliary Department of Iowa office
Phone: (515) 282-7987 Email: aladirector@ialegion.org

***Fill out this form completely**

***Full payment must accompany each order**

***Do not staple checks**

Annual Poppy Proceeds Report is due by **June 20th** each year.

This is a separate form

This report can be found at www.iowaala.org.

Poppy Order Form

Unit Number _____ District _____ Order Date _____

Name: _____

Address (No PO Box): _____

City, State, Zip: _____

Phone: _____

Email: _____

If you would like to pick up your poppy order, make arrangements with the Department office.

Person Picking up Poppies: _____ Phone: _____

BOX 1 Small Poppies - <i>Assembled</i> *Must be ordered in increments of 25*	\$0.35 each	Shipping: 0-500 poppies - \$12.00 525-1000 poppies - \$20.00 1025-4000 poppies - \$25.00 4025-6000 poppies - \$30.00 6025+ poppies - \$35.00	_____ x 0.35 = _____ Cost # Poppies + _____ Shipping BOX 1 = _____ Total
BOX 2 Large Poppies - <i>Assembled</i>	\$1.45 Each	Shipping: 0-100 poppies - \$10.00 101-150 poppies - \$15.00 151-300 poppies - \$20.00 301-500 poppies - \$25.00 501-750 poppies - \$30.00 751+ poppies - 40.00	_____ x 1.45 = _____ Cost # Poppies + _____ Shipping BOX 2 = _____ Total
Box 3 Small Poppy Kit - <i>Units Assemble</i> 1000 poppies/ kit	\$150.00	Shipping: Flat Rate - \$10.00	_____ x 150.00 = _____ Cost # Kits + _____ Shipping BOX 3 = _____ Total

_____ + _____ + _____ = \$ _____
 Total BOX 1 Total BOX 2 Total BOX 3 Amount Due

Check Number _____