



**Top Quality, Top Size Bulbs**  
Flower Bulb Specialists Since 1868  
www.dejager.co.uk

**Address:** The Old Forge, Chartway Street,  
East Sutton, Maidstone, Kent. ME17 3DW

**Tel:** 01622 840229  
**Fax:** 01622 844073  
**E-mail:** sales@dejager.co.uk

# Spring 2010 Retail Order Form

Name:	
Address 1:	
Address 2:	
Town:	
County:	Daytime Tel. No. (in case of queries):
Postcode:	E-mail address:

Please use the correct catalogue number and quantities

	Qty	Catalogue No.	Name of Varieties	£	p
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					

If we are out of stock of a variety may we send a similar one of equal value ?  <b>Yes</b> <input type="checkbox"/>  <b>No</b> <input type="checkbox"/>	<b>Special Instructions:</b>  	<b>Goods Total</b>		
		Post & Packing (refer to Terms of Business)	4	95
		<b>Total Payable</b>		

Method of Payment You Prefer: Cheque <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Maestro <input type="checkbox"/>	Validation/Security Code <input type="text"/> <input type="text"/> <input type="text"/> <small>(Last THREE digits of No. on signature strip on back of card.)</small>
Credit Card Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiry Date: _____ Issue No. _____
Print Name: _____ Signature: _____	

Please Note: Your account will be debited on receipt of order



**Top Quality, Top Size Bulbs**  
Flower Bulb Specialists Since 1868  
www.dejager.co.uk

# Spring 2010 Retail Order Form

CONTINUATION  
PLEASE COMPLETE CONTACT DETAILS OVERLEAF

Please use the correct catalogue number and quantities

	Qty	Catalogue No.	Name of Varieties	£	p
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
41					

If we are out of stock of a variety may we send a similar one of equal value ?

Yes

No

Special Instructions:

**Goods Total**

Post & Packing (refer to Terms of Business)

4

95

**Total Payable**

Method of Payment You Prefer: Cheque  Visa  Mastercard  Maestro

Credit Card Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Validation/Security Code

(Last THREE digits of No. on signature strip on back of card.)

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

Issue No. \_\_\_\_\_

Please Note: Your account will be debited on receipt of order