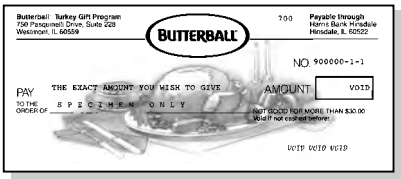


# 2011 ORDER FORM

## Butterball® Turkey Gift Program

www.giftcheckprogram.com  
Telephone: (630) 986-5081



**1. Determine your number of checks, face value and the "Pay to the order of" line:**

Check Quantity	Face Value (max. \$50)	Subtotal	"Pay to the order of" line (check one)
	\$	\$	<small>(EXTRA CHARGE)</small>
	\$	\$	<input type="checkbox"/> Blank <input type="checkbox"/> "Bearer" <input type="checkbox"/> Personalized*
	\$	\$	<input type="checkbox"/> Blank <input type="checkbox"/> "Bearer" <input type="checkbox"/> Personalized*
	\$	\$	<input type="checkbox"/> Blank <input type="checkbox"/> "Bearer" <input type="checkbox"/> Personalized*

**Total Dollar Value of all checks ordered:** \$ \_\_\_\_\_

*\*Personalized checks include the recipients name pre-printed on the 'Pay to the Order of' line. An electronic file (MS Word or Excel only) and a hard copy is required. Do not include titles or departments. Each name should be on one line and cannot be longer than 25 characters, including punctuation and spaces. Names can also be e-mailed to us at: [Butterball@giftcheckprogram.com](mailto:Butterball@giftcheckprogram.com). Please include your company name, contact name and phone number in your e-mail.*

**2. Determine your service charge:**

Multiply total number of **non-personalized** checks by \$ 0.95    \$ \_\_\_\_\_ }  
 Multiply total number of **personalized** checks by \$ 1.05    \$ \_\_\_\_\_ } **Total Service Charge:** \$ \_\_\_\_\_  
*For orders of 20 checks or less, the service charge is a flat fee of \$20.00 — a per-check service charge does not apply.*

**3. Determine your total cost:**

Add together: *Total Dollar Value* and *Total Service Charge*. **TOTAL COST:** \$ \_\_\_\_\_

**4. Include a check (or money order) payable to "Butterball Turkey Gift Program" with your order. Orders cannot be processed without payment in full. Sorry, no credit cards accepted.**

**5. Be sure and include your company's name on each gift check stub at no extra charge.**     *Check here to leave blank.*

*To include your company name, use the dashed lines below. Please limit to one line with 28 characters, including punctuation and spaces. Unless otherwise specified, all names will appear in capital letters. This message appears on all gift check stubs:*

PLEASE ACCEPT THIS CHECK GOOD TOWARD THE PURCHASE OF ANY BUTTERBALL PRODUCT AND OTHER GROCERY ITEMS TO COMPLETE YOUR HOLIDAY MEAL. BEST WISHES TO YOU AND YOUR FAMILY.  
 (Name of your company or a donor name will appear here)

\_\_\_\_\_

**6. Arrival date:**

I need Gift Checks by this date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(specific date required)  
*(Please allow 7-10 days for processing and standard shipping)*

**In a hurry?**

To expedite your order, circle your Overnight Shipping Carrier and include your Account Number below: FedEx or UPS.  
*(FedEx preferred)* \_\_\_\_\_

**Want to know when your order has shipped?**

Provide your e-mail address for automated shipment notification:

(We will only use your e-mail address for automated shipment notification; it will not be sold or distributed to any third party for solicitation purposes.)

Send this form along with a check or money order payable to "Butterball Turkey Gift Program" to:

**Butterball Turkey Gift Program**  
**750 Pasquinelli Dr. #228**  
**Westmont, IL 60559**

*Orders cannot be processed without payment in full.*

**7. Ordered by:**

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Attn: Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Phone \_\_\_\_\_ ext. \_\_\_\_\_  
 Fax \_\_\_\_\_

**8. Ship to: (If different from above; no P.O. Boxes please)**

Company Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Attn: Name \_\_\_\_\_  
 Phone \_\_\_\_\_ ext. \_\_\_\_\_

*Please note: A street address is required for all orders.*

*Unused checks may be returned for a full refund of the face value for up to a year from the date of issue.*