Order Form for signed copy of Charlie's Angle

Name	
Address	
City, State, & Zip	
E-mail	
Title	Amount x Quantity = Total
	12.95 x = 4.95 x =
Please print and fill ou	t this form and mail with check mad

Please print and fill out this form and mail with check made payable to: John Paul McKinney
4217 Wellington Dr.
Fort Collins, CO 80526.

A portion of all proceeds will be donated to the Cystic Fibrosis Foundation. Many thanks.