

FLORIST

ORGANIZED JUNGLE, INC.

MAILING: PO BOX 126 WINTER PARK FL. 32790 SHIPPING: 64 KANTAGREE TRAIL OSTEEN FL. 32764 PHN (407) 599-9880

EMAIL: INFO@ORGANIZEDJUNGLE.COM



DESCRIPTION FOR RENTAL	COST EACH	QUANTITY	TOTAL COST		
Money Saving Booth Package Rates		40		Please contact us for	
Booth Plant Package A, typical 10x10, (\$20.00 savings)	115.00			custom plants, trees,	
One 3', One 4', One Table Top green plant				fountains, waterfalls etc	
Booth Plant Package B , For typical 10 x 20, (\$20 savings)	170.00)		and we can make your	
One 3', Two 4', One Table Top Green Plant				ideas come to life.	
Table Top Green Plant	25.00			Visit our website ORGANIZEDJUNGLE.COM Please email order to info@organizedjungle.com	
2-3 Foot Green Plant	50.00				
4 – 5 Foot Green Plant	60.00)			
6 Foot Green Plant	80.00				
7 Foot Green Plant	90.00				
8' and over Green Plant = Call For Pricing				Orders are delivered prior	
Flowering Plants (azaleas, etc) Red White Pink	35.50			to show opening If you require a signed delivery receipt please signed here: An additional charge of	
Bromeliads, Yellow Red Orange	35.00				
Large Fern Pothos Ivy	35.00				
Bubble Bowl, for business cards, "Yours to keep"	25.00				
INQUIRE ABOUT PLANTS AND FLOWERS FOR				\$20.00 will be applied.	
BANQUETS AND HOSPITALITY SUITES				ALL PRICES INCLUDE	
Floral Arrangements, Please Circle <i>Tropical</i> or <i>Seasonal</i> Single Stem White Orchid Arrangement	70.00			DELIVERY, CONTAINERS SERVICING & REMOVAL AT SHOWS END.	
	70.00	1			
Fresh Cut Flower Arrangements 12" high (Shape)	95.00			NO REFUNDS OR ADJUSTMENTS WILL BE MADE AFTER THE CLOSE OF THE SHOW. A 50%	
Fresh Cut Flower Arrangements 24" high	115.00				
(Shape)					
Custom Floral Arrangement (please ask for quote)				RESTOCKING FEE WILL	
If you have a sample picture please e-mail it to us.				BE CHARGED ON ANY	
SUBTOTAL				ORDER CANCELLED.	
ADD 6.5% SALES TAX					
TOTAL - INCLUDING SALES TAX				∢PLEASE PAY THIS AMOUNT	
Company:			_ Booth #	<u>:</u>	
Address:					
City: State:			_Zip:	-	
Phone: (Booth	n Contact	:			
Cell # E-Mail	l:				
VISA-MC-AMEX Card#			Ехр.	. Date/,	
CC Billing Address:		City	y:		
State:Zip code: Print Name on Car	d:				
Signature:					