



2014 CONTRACT SEEDLING ORDER FORM
for 2015 Sowing Contracts

CUSTOMER: _____
 CONTACT: _____
 ADDRESS: _____
 CITY/ST/ZIP: _____

PHONE #: _____
 FAX #: _____
 CELL: _____
 E-MAIL: _____

Age Class	Transplant Season	Outplant Season	Cell Size	Species	Seedlot ID			Seed Source	Seed Location	Sowing Nursery	Transplant Nursery	Special Services	Quantity
					*Zone-Elev.	*Collection Yr.	Seedlot Name						
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
												Total Quantity	0

*Include zone/elev. & collection year for all lots

SPECIAL INSTRUCTIONS: _____
 (Target seedling sizes, etc.) _____

MAIL, EMAIL OR FAX COMPLETED FORM TO:

Scott Rush
 IFA Nurseries, Inc
 463 Eadon Road
 Toledo, WA 98591
 Phone: (360) 864-2828

Fax: (360) 864-2829

Email: srush@ifanurseries.com

FOR ASSISTANCE CONTACT:

	<u>Phone</u>	<u>FAX</u>
OR/CA Steve Akehurst	(541) 556-8907	(541) 995-4739
WA/ID Roger Wimer	(360) 749-1785	(360) 636-7950

 Authorized by

 Date