

OUR WEDDING GUEST LIST

Name(s) _____	<input type="checkbox"/> Save-the-date card sent
Address _____	<input type="checkbox"/> Invitation sent
_____	<input type="checkbox"/> R.S.V.P. received
Phone _____ Cell _____	<input type="checkbox"/> Thank-you sent
Email _____	Meal Selection (enter name/circle option)
Gift _____	_____ A B C
	_____ A B C
	_____ A B C
	_____ A B C

R.S.V.P.: _____ # Adults _____ # Children

Name(s) _____	<input type="checkbox"/> Save-the-date card sent
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_____	<input type="checkbox"/> R.S.V.P. received
Phone _____ Cell _____	<input type="checkbox"/> Thank-you sent
Email _____	Meal Selection (enter name/circle option)
Gift _____	_____ A B C
	_____ A B C
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