

ORDER FORM

**PRINT CLEARLY
DO NOT STAPLE
ORDER FORMS TOGETHER**

STUDENT'S FIRST NAME

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STUDENT'S LAST NAME

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(PRINT ALL IN CAPITAL LETTERS INSIDE BOXES)

School Name _____
Teacher _____
Grade _____ Class _____

INSTRUCTIONS FOR PLACING ORDER

Print your customer's name.
For each item selected, fill in the item number, how many ordered and total price.

**NO CREDIT CARDS ACCEPTED
ON PRODUCT ORDERS**

USE ONE LINE FOR EACH ITEM ORDERED. SEE EXAMPLE BELOW.

1056958-0414

CUSTOMER NAME AND PHONE #	ITEM CODE	HOW MANY	BRIEF DESCRIPTION OF ITEM	SINGLE ITEM PRICE FROM BROCHURE	TOTAL FOR THIS ITEM (price x quantity)	TOTAL AMT. FOR THIS CUSTOMER (all items)	PAID
Mary Sample 555-3455	C 2 1 1	2	Sugar Pre-portion Cookie	15.00	30.00		
" "	G 6 2 5 2	2	Cinnamon Apple Candle	23.00	46.00	76.00	✓
1							
2							
3							
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19							
20							
21							
22							
23							

NUMBER OF ORDER FORMS USED FORM OF

ADD TOTAL ITEMS SOLD

TOTAL AMOUNT TO COLLECT THIS FORM

Thank you for your support.
Customer satisfaction 100% guaranteed

TOTAL \$ COLLECTED FROM THIS STUDENT

(Write total on one form only)

ALL ORDERS SHOULD BE SUBMITTED ON AN ORDER FORM.

