

# FUNDRAISING ORDER FORM

NAME \_\_\_\_\_

Please Return Your Completed Orders To \_\_\_\_\_ By \_\_\_\_\_

Bags Will Be Delivered \_\_\_\_\_ Checks Payable To \_\_\_\_\_

Any Questions, Please Contact \_\_\_\_\_

## THE \_\_\_\_\_ WILL BE FUNDRAISING WITH CHICOBAG™

**INSTRUCTIONS** Please fill out as much detailed information as possible. If your customer would like to order more than 4 lines, go to next order section.

\*\* example of filled-out order form

	BAG STYLE	COLOR	QTY	COST PER BAG	TOTAL	TOTAL AMOUNT FOR ORDER
NAME Jane Doe	Original	Mango	2	\$5	\$10	<b>** EXAMPLE ONLY **</b>
ADDRESS 25 Nicole Lane	Original	Green	1	\$5	\$5	
Chico, CA 95928	Vita	Dusk	1	\$6.50	\$6.50	
PHONE 555-5555	Vita	Plum	3	\$6.50	\$19.50	
						TOTAL FOR ORDER: \$41
NAME						
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