Individual Order Form

Organization Name _____ Seller's Name _____

Teacher (If applicable)_____ Seller's Phone _____

Please help us raise funds ! The money you help us raise will go towards : (Type a brief Explanation)

_____

_____

✺ Please return this form along with money collected to your organization by : (Type Date Due)

Customers Name	Phone #	Item	Quantity	Price Each	Total Due

Make Checks payable to (Type Organizations Name)

Total Due From Seller : _____

Notice to Organization:

✺ Please retain a copy of the order form for your records.