

Required by Date:

(Office Use Only)

SMT NUM:

DATE RECEIVED:

ORDER \_\_\_\_ OF \_\_\_\_

## Full Colour Fundraising Tea Towel Order Form



Name:						Conta	act Number:		
	ation Na	me:							
Organisation Email:									
Email for Proof:									
Organisation Address:				Delivery Address:  Invoice Address:			ess:		
Full Colour Print Tea Towels  Please confirm the quantities you would like for your required product:									
Gro	oup Desig (1 design			Quantity	Individual Designs Tea Towels  NO. DESIGNS SENT Full Quantity				
Group De	sign Whit	e Co	tton		Individual Design White Cotton				
Group Design Natural Cotton				Individual Design Natural Cotton					
Group Design Linen Union				Individual Design Linen Union					
Please tick the border if required:									
	В		С	D D	E E	F F	G	н	I
	К		L	м	N	0	Р	Q	R
	Т		υ	V	W	Х	Υ	Z	XMAS 1
MAS 2	XMAS 3		YEAR	PLAIN LINE	EASTER BUNNIES	EASTER BLOOMS	ROCKETS	ECO	FAIRIES
LSRM	ABC123		ORGANIC	FLORAL 1	FLORAL 2	FLORAL 3	FLORAL 4	FLORAL 5	
Any Special print, colour, design instructions:									

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	ORDER	OF		

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## Full Colour Fundraising Shopping Bags Order Form

Name:		Contact Number:			
Organisation Name:					
Organisation Email:					
Email for Proof:					
Organisation Address:		Delivery Address:	Invoice Address:		
Full Colour Print Shopping Bags Please confirm the quantities you would like for your required product:					
Group Design Shoping Bags (1 design per form)	Guartity	Individual Design Shopping Bag	s NO. DESIGNS Full Quantity SENT		
Group Design Natural Cotton		Individual Design Natural Cotton	n		
Group Design Natural Canvas	S	Individual Design Natural Canvas			
Group Design Canvas Coloured Gusset colour:		Individual Design Canvas with Coloured Gusset	colour:		
	Printing Option	s: Bag Options:			
	1 Sided Print	Short Handles			
	2 Sided Print (Same Design)	Long Handles			
	2 Sided Print (Different Design)	(Coloured gusset canvas bag only available with long handles)			
Any Special print, colour,	Any Special print, colour, design instructions:				



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(Office Use Only)				
SMT N	IUM:			
DATE	RECEIVED:			
	ORDER	OF		

## Full Colour Fundraising Aprons & T-Shirts Order Form

Name:			Contact Number:				
Organisati	ion Name:						
Organisatio	on Email:						
Email for I	Proof:						
Organis	sation Addre	ss:	Delivery A	Address:	Invoice Addre	<b>2</b> SS:	
	Ple	_		rint Aprons ntities you would like for y	our product:		
· .	Apron Size	White Natural Cotton Cotton		Individual Designs? (State qty of designs sent)	Total Quantity		
	Toddler						
	Child's						
	Adult						
	Full Colour Print T-Shirts  Please tick required and confirm the quantities you would like for your product:						
	T-Shirt	Size(s)	Group Design?	Individual Designs? (State qty of designs sent)	Total Quantity		
	Child's						
	Adult						
Any Speci	al print, colo	our, design instruct	ions:				
						*	



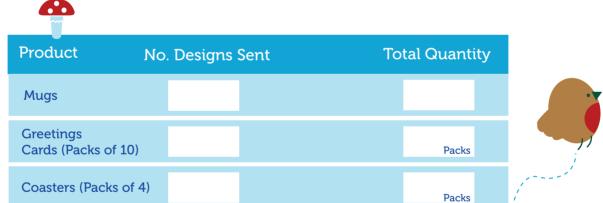
(Office Use Only) SMT NUM: **DATE RECEIVED:** ORDER \_\_ OF

Full Colour Greetings Cards / Mugs / Coasters Order Form

Name:	Contact Number:
Organisation Name:	
Organisation Email:	
Email for Proof:	
Organisation Address:	Delivery Address:  Invoice Address:

## Greetings Cards, Mugs, Coasters

Please confirm the quantities you would like for your product:







Any Special print, colour, design instructions:



Required by Date:

