



*"Your Northern Ontario"
Fundraising Source*



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FROZEN VARIETY PACK ORDER FORM

Canvasser: _____ Phone #: _____ Organization: _____ Teacher / Class #: _____ Order Deadline: _____						
	F010 Variety Pack	F020 Pasta Pack	F030 Ravioli Pack	F040 Soup Pack	F050 Appetizers	TOTALS

Name	Phone	Address	\$ 30 case	\$25 case	\$30 case	\$25 case	\$40 case	Person Total
Total Cases								
X cost per case			\$30	\$25	\$30	\$25	\$40	
Total Sales								

Return Order Form By: _____

Pickup Time & Date: _____ **Thank You for** **TOTAL # OF CASES** _____

Pickup Location: _____ **your support!** **TOTAL \$ SUBMITTED** _____

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