Fort Zumwalt West Band Boosters

Weekly Scrip Order Form

Revised 10/20/2011

Person Ordering: _____ Date: _____

Student(s) to credit Net Proceeds: _____ (&) _____

Home Phone #: _____ Cell #: _____ ***e-mail***: _____

Please put a current email

Scrip Delivery: _____ I will pick-up (lives outside FZW boundaries) _____ Mail to:

_____

_____ Send it home w/student _____

_____

Instructions:

1. Select the Retailers you wish to buy scrip from. Fill in retailers name and number of scrip you want for each denomination (use one line for each denomination)
2. For each line total the gross amount. **Please** do not fill out the % or net earned lines
3. At the bottom total the "Gross Amount" make check payable to: **FZW Band Boosters**
4. Send order to school, mail it / drop it off to: Connie Krull / FZW Scrip
   2307 Hidden Deer Dr O'Fallon, MO 63368

Orders must be received by **3 pm** on Sunday.

Questions: 240-5540 or krullx6mom@gmail.com

	Fill In	**Fill In**	**Fill In**		**FOR OFFICE USE ONLY**	
Retailer	Quantity	Denominations	Gross Amt		%	Net Earned
Example Store	5	$10	$50			
Example Store	1	$25	$25			
Write a check to FZW Band Boosters		For this amount:	$75			

ADD A SECOND PAGE IF MORE ROOM IS NEEDED

				FOR OFFICE USE ONLY		
Retailer	Quantity	Denominations	Gross Amt		%	Net Earned
		Write check: **FZW Band Boosters**				
Scrip should be treated as CASH		For the Gross Amount - - - >				

Please do not write in this area, thanks