Name of Organization: _____

(Please make cheques payable to your organization)

PARTICIPANT'S NAME: _____ ADDRESS: _____

PH: _____

	A) Chewy Brownie Mix	B) Grandma's Oatmeal Raisin Cookie Mix	C) Chippers Cookie Mix	D) Ginger Crinkle Cookie Mix	E) Cranberry Chip Cookie Mix	F) Classic Sugar Cookie Mix	G) Pasta Salad Mix	H) Lemon Poppy Seed Scone Mix	I) Raspberry Burst Scone Mix	J) Blissful Blueberry Muffin Mix	K) Beefy Macaroni Soup Mix	L) Minestrone Soup Mix	M) Noodle Soup Mix	N) Potato Medley Soup Mix	O) Western Chili Mix	TOTAL NUMBER OF JARS	TOTAL DUE @$10.00	PAID BY:
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Name _____ Phone _____																		
Column Totals																		

THANK YOU FOR YOUR SUPPORT