

Name Pad Order Form

Return by _____. Make check payable to _____. Pads will be delivered by _____.

Student Name _____ Teacher _____ Grade _____

Parent Name _____ Phone _____

PLEASE PRINT NEATLY IN **INK**. ALL 100 SHEET PADS CONTAIN 20 SHEETS EACH OF YELLOW, BLUE, RED, GREEN, AND FUSCIA. SELECT **SCRIPT** OR **BLOCK** TYPESTYLE.

	Name as it is to appear on pad.	Logo	Script	Block	No. of Pads	Price/Pad	TOTAL	
1	BUYER					5.00		
2	BUYER					5.00		
3	BUYER					5.00		
4	BUYER					5.00		
5	BUYER					5.00		
6	BUYER					5.00		
7	BUYER					5.00		
8	BUYER					5.00		
9	BUYER					5.00		
10	BUYER					5.00		
Did you print clearly, neatly and legibly?					TOTALS			