

ORDER FORM

RETURN DATE:	DELIVERY DATE:
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MY NAME: _____
 PHONE #: _____
 ORGANIZATION: _____
 MAKE CHECKS PAYABLE TO: _____

\$14 EACH

ALLERGEN NOTICE
 PRODUCTS CONTAIN EGG, MILK, SOY, WHEAT. PRODUCTS DO NOT CONTAIN NUTS, BUT ARE MANUFACTURED IN A FACILITY AND ON EQUIPMENT WHICH PROCESSES NUT PRODUCTS.

APPLE	CINNAMON	CREAM CHEESE	RASPBERRY	CARAMEL ROLLS	STRAWBERRY & CREAM CHEESE	4 CHEESE & HERB
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CUSTOMER NAME	PHONE NUMBER	ITEMS	AMOUNT
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
6.			\$
7.			\$
8.			\$
9.			\$
10.			\$
11.			\$
12.			\$
13.			\$
14.			\$
15.			\$
16.			\$
17.			\$
18.			\$

TOTAL EACH COLUMN

\$14 EACH						ITEMS	AMOUNT
							\$



1-888-879-2589
 WWW.RITEBITEFUNDRAISING.COM
 INFO@RITEBITEFUNDRAISING.COM

THANKS SO MUCH FOR YOUR SUPPORT!

PRODUCTS ARE EXCLUSIVE TO FUNDRAISING AND NOT SOLD IN RETAIL STORES
 PASTRIES - 22 OZ. | CARAMEL ROLLS CONTAIN 9 INDIVIDUAL ROLLS - 23 OZ.