

Pick up First Name: _____

Last Name: _____

SCRIP CASH & CARRY ORDER FORM GROCERY and KOHL'S



Orders may be sent in to the PTP c/o SCRIP at anytime. No envelopes please. Staple your check to this form.

Pre-ordered SCRIP may be picked up in Gathering Space at the following times:

Wednesday/Friday Mornings from 8:00-8:45

Wednesday Afternoons 2:00-2:45

Saturday evening Mass

Sunday morning Masses 8:00 until 12:00

CHOOSE ONLY ONE:

CREDIT THIS FAMILY _____

CREDIT THIS TEACHER _____

CREDIT THIS PROGRAM /PTP _____

STORE NAME	Quantity of \$100	Quantity of \$50	Quantity of \$25	Quantity of \$20	Quantity of \$10	\$ TOTAL
WEIS				N/A		\$
GIANT (3%)				N/A		\$
SHOPPERS	N/A	N/A	N/A			\$
SUPER FRESH				N/A	N/A	\$
FOOD LION				N/A		\$
LAUER'S IGA	N/A		N/A		N/A	\$
KOHL'S				N/A		\$
TOTAL \$ AMOUNT DUE						\$

**Please do not combine payment with a Store SCRIP order. Separate checks please!
Please make checks payable to: ST. JOHN'S PTP**

Check Number: _____

Date of Order: _____

FILL OUT AT PICK-UP ONLY:

I have received the listed amount of SCRIP. I understand that gift cards/certificates may not be exchanged once I have left the scrip table.

Total \$ of SCRIP received: \$ _____

Signature _____

Date of Pick-Up _____