That's My Pan! ®

Personalized Gift Fundraiser

Group Name/Contact Person: _____

Contact Person Phone#: _____

INDIVIDUAL ORDER FORM

ITEM	COLOR	DESIGN	Wording A or B	**Personalization** PLEASE PRINT CLEARLY	PRICE

Sold To:		**Name of Group Member Selling**	**Shipping** Add $1.10 per item	
Address:			SUBTOTAL	
City, State, Zip:			If not EXEMPT Add 5.5% WI Sales Tax	
Phone #:			**TOTAL DUE**	

Make sure to collect all money at the time of order.
Check with your Contact Person regarding who to make checks
Do not **make checks payable to That's My Pan!®**

CHECKS PAYABLE TO:
COLUMBIA COUNTY 4-H

DEADLINE: 11/6/09