School Fundraising Coffee Order Form

	Date
I	Date

CUSTOMER- Please fill out the details so we can send you a receipt of purchase/ payment Contact: School: Email:

Linam

Address:

Telephone:

Choose your quality: Premium/specialty

Premium Coffee

Coffee Size		Number of Bags (mark with x)			
	200	400	600	800	Other (specify)
Premium Roasted Coffee 9 oz Bags					
	150	300	450	600	Other (specify)
Premium Roasted Coffee 12 oz Bags					
	110	220	330	440	Other (specify)
Premium Roasted Coffee 1 lb Bags					
Customization	Black	White	Kraft		
Bag Color					
	Light	Meidum	Dark		
Roast Level					
	Whole E	Bean	Ground		
Whole Bean or Ground					
	-	-			
Specialty Coffee					

Coffee Size	Num	Number of Bags (mark with x)			
	200	400	600	800	Other (specify)
Specialty Roasted Coffee 9 oz Bags					
	150	300	450	600	Other (specify)
Specialty Roasted Coffee 12 oz Bags					
	110	220	330	440	Other (specify)
Specilaty Roasted Coffee 1 lb Bags					

Bag Color	Black	White	Kraft
Roast Level	Light	Meidum	Dark
Whole Bean or Ground	Whole B	ean]	Ground

Next Steps

After the reception of your filled order form we will provide you a final invoice, including payment information, for your accounting purposes. Please attach the PDF of the labee you wish to use, or, contact us for support in creating your custom label.