Organization Name / School:	PARTY LIT
Grade / Room No:	<b>FUND</b> RAISIN
Seller's Name:	50% of all cales benefit organi

DRAISING	Return orders & payments by:

Please make checks payable to your organization or school.

Seller's Name:		50% of all sales benefit organization or school!													i School.	
		Your PartyLite Consultant														
Adult Email:		_			rī				_						10% Shipping & Handling	
Ship to Adult Name:		_		ry	aybe	ght	.⊑	M ™	ies ™		Fairies				for AK, HI,	
Ship to Stree	et Address:			pbe	8 I		mpk	ice.	berr	3	m Fall				PR, Guam, U.S. VI and	
	City:			Ras	mon	erry	r Pu	ly Sp	Mou	ج ج					designated APO/FPO locations on	
	State: Zip:	_	D. J.	Slack	Cinnamon & Bayberry	Cranberry Delight	renci	Holiday Spices ™	Iced Snowberries	Vallbe	pice	0	Subtotal \$	Sales Tax \$		T-4-I Dua fi
1	Name	18-Pack Tealights	Price \$15	Ш				Ė	_	2 0	,, 0,	Quantity	Subtotal \$	(if applicable)	Subotal \$	Total Due \$
	Phone	12 Votives with Holder	\$20													
	Address	Jar Candle Pair	\$20													
	Email							Su	pport	er To	otal					
2	Name	18-Pack Tealights	\$15					П								
	Phone	12 Votives with Holder	\$20													
	Address	Jar Candle Pair	\$20													
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3	Name	18-Pack Tealights	\$15													
	Phone	12 Votives with Holder	\$20													
	Address	Jar Candle Pair	\$20													
	Email							Su	pport	er To	otal					
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	Phone	12 Votives with Holder	\$20													
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	Email							Su	pport	er To	otal					
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	Phone	12 Votives with Holder	\$20													
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	Phone	12 Votives with Holder	\$20													
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	Phone	12 Votives with Holder	\$20													
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Da	Top copy: Return to Organization/School								Т	ОТАІ	LS					

Organization Name / School:	PARTY LIT
Grade / Room No:	<b>FUND</b> RAISII
Seller's Name:	500/ of all calca banefit arrang

INIC	Return orders & payments by:

Please make checks payable to your organization or school.

Adult Email: Ship to Adult Name: Ship to Street Address: City: State: Zip: Price 18-Pack Tealights 118-Pack Tealights 12 Votives with Holder Address Email  19-Phone 12 Votives with Holder 13 Name 18-Pack Tealights 18-Pack Tealights 19-Phone 12 Votives with Holder 12 Votives with Holder 12 Votives with Holder 13 Name 18-Pack Tealights 18-Pack Tealights 19-Phone 19-Phone 10 Votives with Holder 10 Votives with Ho	Seller's Name:Adult Phone Number:		—— 50% of all sales benefi	50% of all sales benefit organization or school!													
Abdress			Your PartyLite Consultant						П								
1   Name	Adult Email:					Ē				_							
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1   Name					ack	nnar	anb	nger	lida	S pa	icec	Igar			Sales Tax \$		
1   Name				_	B	Ö	ပ် မ	<u>5</u>	Ĭ	2 2	S S	3	Quantity	Subtotal \$	(if applicable)	Subotal \$	Total Due \$
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Email		Phone	12 Votives with Holder														
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Address	5	Name	18-Pack Tealights	\$15													
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