

SCRIP GIFT CARD ORDER FORM

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Student Name: _____ Class: _____ Student Name: _____ Class: _____

Parish ID: _____ Date: _____ Parish ID: _____ Date: _____

Vendor/Amount	Profit	Qty	Cost	Vendor/Amount	Profit	Qty	Cost
Body Shop \$25	8%			Body Shop \$25	8%		
Buca \$25	8%			Buca \$25	8%		
LL Bean \$25	15%			LL Bean \$25	15%		
Macy's \$25	10%			Macy's \$25	10%		
Old Navy/Athleta \$25	14%			Old Navy/Athleta \$25	14%		
The Total Look Salon (Stokes Rd.) \$25	10%			The Total Look Salon (Stokes Rd.) \$25	10%		
Order Total				Order Total			

Cash _____ Check # _____

Cash _____ Check # _____

Updated 9/19/18

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