MOTHER TERESA CATHOLIC ACADEMY
SCRIP ORDER FORM

○ **PREORDER**
(Please mark if applicable.)

Buyer's Name: _____ **Date:** _____

Buyer's Contact Information_____ **Purchase Location**: School Rectory Mass _____
(time)

TUITION CREDIT GIVEN TO (FAMILY NAME): _____ **(Must be completed on EACH order form.)**

Circle School Attending: **Mother Teresa Catholic Academy** **Marian Catholic High School**

Only 5% of the listed percentages goes to administrative costs, 95% of the listed percentages is CREDITED FOR TUITION. (If this section is not completed at the time of purchase, no tuition credit will be given – NO EXCEPTIONS.)

MERCHANT	CARD VALUE	# OF CARDS ORDERED	AMOUNT RECEIVED	PRE-ORDER AMOUNT

$_____ $_____
(Total Received) (Total Pre-Order)

TOTAL AMOUNT PAID $_____
(ORDER MUST BE PAID IN FULL, INCLUDING PRE-ORDER ITEMS)

PAYMENT METHOD: CASH CHECK CHECK #_____

SELLER INITIALS: _____
WITNESS INITIALS: _____

BUYER INITIALS RECEIPT OF FULL ORDER: _____

OR

BUYER INITIALS RECEIPT OF PARTIAL ORDER: _____

2016/17