



Easter Fundraising Form

4615 Ottawa Street Bismarck, ND 58503
701-258-1742

Organization Name: _____

Chairperson Name: _____

Organization Address: _____

Chairperson Phone: _____

Participant Name: _____

Delivery Date: _____

Customer Name and Address	Telephone	\$ _____ Each 6" Easter Lily			\$ _____ Each	Total \$	Paid
		Classic White	Shades of Pink	Shades of Orange	Azalea		
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total Items Sold							
						Amount Due	\$ _____
						Amount Paid	\$ _____