

**ST PAUL UNITED METHODIST CHURCH ORDER FORM
SHARE FOOD PACKAGE(S)
OCTOBER 2017 ORDER**

Orders must be placed and paid for by Sunday, **Oct 8, 2017**. Delivery date is Saturday, **Oct 21, 2017**.
Orders must be picked up at the **designated time (between 11:30 - 12:00 PM)**. Orders not picked up will be donated to some needy family or individual. **Orders cannot be left in the refrigerator or freezer at St. Paul. Orders cannot be held over!**

Payment methods: Cash, Check, Money Orders, Debit/Credit Card or EBT cards

Order Dates:

Saturday, SEPT 23, 2017 – 11:30 a.m. to 12:00 p.m.
Sunday, OCT 1, 2017 – 9:30 a.m. to 10:30 a.m. & 12 noon to 1:00 p.m.
Saturday, OCT 7, 2017 – 9:00 a.m. to 11:00 a.m.
Sunday, OCT 8, 2017 – 9:30 a.m. to 10:30 a.m. & 12 noon to 1:00 p.m.

NOTE: Envelopes will be provided, on the easel in the hallway. You may complete the order form, put it in the envelope with the exact amount and place it in the collection plate or turn it into the office when it is open.

*****PLEASE COMPLETE THIS SECTION*****

Name: _____
Phone Number: _____
Date of Order: _____

\$21.50	\$29.50	\$21.50	\$22.50	\$19.50
VALUE/ REGULAR:	PORK LOVERS' BOX:	STEAK BOX:	BBQ CHICKEN BREASTS:	PASTA MEALS:
Quantity _____	Quantity _____	Quantity _____	Quantity _____	Quantity _____
Total \$ _____	Total \$ _____	Total \$ _____	Total \$ _____	Total \$ _____
Rec'vd by _____	Rec'vd by _____	Rec'vd by _____	Rec'vd by _____	Rec'vd by _____
Verified by _____	Verified by _____	Verified by _____	Verified by _____	Verified by _____

Circle One: Cash Money Order Check Debit Credit EBT
(Payable to Share) (Payable to SPUMC)

RECEIPT

NOTE PICK UP TIME!!

St. Paul United Methodist Church
6634 St. Barnabas Road, Oxon Hill, MD 20745
301-567-4433

October 2017 ORDER

Name: _____

Value/Reg -# _____	Pork Lovers' Box- # _____	Steak Box - # _____	BBQ Chicken Breasts- # _____	Pasta Meals-# _____
Amount \$ _____	Amount \$ _____	Amount \$ _____	Amount \$ _____	Amount \$ _____

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Received by: _____ **Amount \$** _____ **Date:** _____