

Scrip Gift Card Order Form
Revised January, 2019

Sales Order # _____
Office Use Only

Grocery & Pharmacy

<u>Qty</u>	<u>Amount</u>	<u>Store Name/\$</u>
5%	_____ \$ _____	Family Fare \$25
5%	_____ \$ _____	Family Fare \$50
5%	_____ \$ _____	Family Fare \$100
5%	_____ \$ _____	HyVee \$25
5%	_____ \$ _____	HyVee \$50
5%	_____ \$ _____	HyVee \$100

Miscellaneous

4%	_____ \$ _____	Ace Hardware \$25
10%	_____ \$ _____	Aksarben Cinema \$15
2.5%	_____ \$ _____	Amazon.com \$25
13%	_____ \$ _____	Bath & Body \$10
7%	_____ \$ _____	Bed, Bath & Beyond & buy, buy Baby \$25
1.5%	_____ \$ _____	BP Gas \$50
10%	_____ \$ _____	Cosgraves \$10
4%	_____ \$ _____	Kohl's \$25
4%	_____ \$ _____	Lowe's \$25
3%	_____ \$ _____	Menards \$25
3%	_____ \$ _____	Menards \$100
11%	_____ \$ _____	Omaha Steaks \$25
5%	_____ \$ _____	Petsmart \$25
1.5%	_____ \$ _____	Shell gas \$25
2.5%	_____ \$ _____	Target \$25
5%	_____ \$ _____	Walgreens \$25
2.5%	_____ \$ _____	Walmart/Sams \$25
2.5%	_____ \$ _____	Walmart/Sams \$100
1.25%	_____ \$ _____	American Express \$25
1.5%	_____ \$ _____	American Express \$100

Restaurants

<u>Qty</u>	<u>Amount</u>	<u>Rest. Name/\$</u>
8%	_____ \$ _____	Applebees \$25
8%	_____ \$ _____	Arby's \$10
8%	_____ \$ _____	Buffalo Wild Wings \$25
4%	_____ \$ _____	Burger King \$10
10%	_____ \$ _____	Chipotle Mex. Grill \$10
8%	_____ \$ _____	Cracker Barrel \$25
3%	_____ \$ _____	Dairy Queen \$10
20%	_____ \$ _____	Don & Millies \$10
3%	_____ \$ _____	Dunkin' Donuts \$10
15%	_____ \$ _____	Lansky's \$10
8%	_____ \$ _____	Olive Garden, Cheddars, & Longhorn Steakhouse \$25
8%	_____ \$ _____	Outback, Flemming's, Bonefish Grill, \$25
8%	_____ \$ _____	Panera Bread \$10
16%	_____ \$ _____	Petrows \$5
8%	_____ \$ _____	Red Lobster \$25
10%	_____ \$ _____	Runza \$10
10%	_____ \$ _____	Scooters \$10
7%	_____ \$ _____	Starbucks \$5
7%	_____ \$ _____	Starbucks \$10
6%	_____ \$ _____	Subway \$10
5%	_____ \$ _____	Taco Bell \$10
8%	_____ \$ _____	Texas Roadhouse \$25
13%	_____ \$ _____	Village Inn \$25
4%	_____ \$ _____	Wendy's \$10
0%	_____ \$ _____	Scrip Gift Certificate

SCHOOL FAMILIES ONLY: FILL OUT FOR TUITION

School Family Name (Last Name, First Name):

 _____ Credit toward tuition

Date: _____
Name: _____
Check #: _____ Cash: _____
Credit/Debit Card/Ipad V MC D (circle one)
Total: _____

Note: Scrip purchases are NOT TAX DEDUCTIBLE