Order for Office Supplies

Parish _____

Address _____

Town _____ Prov _____ Postal Code _____

Ordered by _____ Date _____

Signature _____

Check https://www.staples.ca/ and make your selection or send this form with the description and we'll do the shopping

Send completed form to : email: reception.agm@outlook.com
fax: (780) 532-0706

Item Description	Item #	Qty.

Ship to:

Parish _____

Address _____

Town _____ Prov _____ Postal Code _____

Contact Name: _____

Ph: _____ email: _____