Scrip (Gift Card) Order Form

Name: _____

Please return completed form with payment to:
Congregation B'nai Shalom
Attn: Scrip Program
117 E Main St
P.O. Box 1019
Westborough, MA 01581-6019

Date: _____

Phone: _____

Email: _____

Questions?: scrip@cbnaishalom.org or 508.366.7191

For Office use only:	
Sold by:	
Check #:	
Debit #:	Debit Date:
Cash:	

Please type or write legibly!

Store	Card Value	Number of Cards	Total ($) Amount
		Total:	

form date 28-Oct-2009

Please type or write legibly!

If you are ordering two different denominations form the same merchant, enter each denomination on a separate line, for example:

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Stop&Shop | $50 |  3  | $150
Stop&Shop | $25 |  7  | $175
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