

Return Order On: Sept. 19	Delivery Date: Oct. 17

	INCLUITI	Oraci On. Sept. 15	Delivery Date. Oct. 17							
Students—please use the following as your solicitation method:										
Market to those you know and neighbors you trust										
	2)	Say the following: Hi, I'm	from the Panther Creek HS Chorus Program.							

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	We are doing 1 fundraiser this year to help support our program's needs; would yo								
consider supporting me in this drive?									

Collect money up front; leave an impression that their business helps to make our program possible!

My Name: My Phone #:									te	E	ALLERGEN NOTICE:		
Make Checks To: P	PCHS Choral Boosters Contact Phone #: Please collect payment when taking order.			Apple	Raspberry	Cinnamon	Cream Cheese	Four Cheese & Herb	Blueberry Cream Cheese	Double Chocolate	Strawberry Cream Cheese	This product may contain Egg, Milk, Soy, Wheat. This product does not contain nuts, but is manufactured in a facility and on equipment which processes nut products.	
Contact Name:													
MY GOAL		Customer Name	Address	\$14	\$14	\$14	\$14	\$14	\$14	\$14	\$14	Items	Amount
>8 items	1												\$
CDOUD COAL	2												\$
<u>GROUP GOAL</u> 1200 Items	3												\$
1200 Items	4												\$
FUNDRAISER PURPOSE	5												\$
Chorus program	6												\$
needs: Music,	7												\$
concert expenses,	8												\$
benevolence, etc.	9												\$
	10												\$
How to bake:	11												\$
	12												\$
Allow your frozen pastry	13												\$
to thaw and rise until about double in size -	14												\$
usually takes 8-10 hours.	15												\$
Then bake and frost for a homemade treat!	16												\$
a nomemade treat:	17												\$
It's homemade if you have to	18												\$
wash a pan, right?	19												\$
	20												\$
Legacy Fundraising	egacy Fundraising V		com	AP	RA	CI	СС	ВС	BV	DC	SC	Items	Amount
919-825-4848 info@legacy-fundraising.	com	www.butterbraid.com	Please Total										\$