

ST. JOHN SCRIP ORDER FORM

STORES

2.25%	AMAZON.COM	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
		\$ 100 X _____ = _____
8%	BARNES & NOBLE	\$ 10 X _____ = _____
12%	BATH & BODY	\$ 10 X _____ = _____
4%	BEST BUY	\$ 25 X _____ = _____
8%	DICK'S SPORTING	\$ 25 X _____ = _____
4.75%	FLEET FARM	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
		\$ 50 X _____ = _____
		\$ 100 X _____ = _____
6%	JOANN FABRICS	\$ 25 X _____ = _____
5%	KOHL'S	\$ 25 X _____ = _____
		\$ 50 X _____ = _____
		\$ 100 X _____ = _____
	* can pay store charge	
4%	MENARDS	\$ 25 X _____ = _____
		\$ 100 X _____ = _____
4%	MICHAELS	\$ 25 X _____ = _____
5%	OFFICE MAX	\$ 25 X _____ = _____
14%	OLD NAVY	\$ 25 X _____ = _____
2.5%	TARGET	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
		\$ 50 X _____ = _____
		\$ 100 X _____ = _____
4%	ULTA BEAUTY	\$ 25 X _____ = _____
5%	WALGREENS	\$ 25 X _____ = _____
		\$ 100 X _____ = _____
2.5%	WALMART / SAM'S CLUB	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
		\$ 100 X _____ = _____

THEATER & MUSIC

8%	MARCUS	\$ 25 X _____ = _____
5%	I TUNES	\$ 15 X _____ = _____

SPECIAL ORDERS NOT INCLUDED ON FORM

_____	\$ ____ X _____ = _____
_____	\$ ____ X _____ = _____
_____	\$ ____ X _____ = _____

RESTAURANTS

7%	2510	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
8%	APPLEBEES	\$ 25 X _____ = _____
8%	ARBY'S	\$ 10 X _____ = _____
8%	BUFFALO WW	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
4%	BURGER KING	\$ 10 X _____ = _____
10%	CULVERS	\$ 5 X _____ = _____
		\$ 10 X _____ = _____
	EDGAR FAMILY RESTAURANT	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
5%	MCDONALDS	\$ 10 X _____ = _____
		\$ 25 X _____ = _____
8%	OLIVE GARDEN	\$ 25 X _____ = _____
8%	PANERA BREAD	\$ 10 X _____ = _____
7%	QDOBA	\$ 25 X _____ = _____
8%	RED ROBIN	\$ 25 X _____ = _____
7%	STARBUCKS	\$ 10 X _____ = _____
10%	SUBWAY	\$ 5 X _____ = _____
		\$ 10 X _____ = _____
5%	TACO BELL	\$ 10 X _____ = _____
8%	TEXAS ROADHOUSE	\$ 25 X _____ = _____

GAS STATIONS

1.5%	BP GAS	\$ 50 X _____ = _____
2%	C-STORE	\$ 25 X _____ = _____
4%	KWIK TRIP	\$ 25 X _____ = _____
		\$ 100 X _____ = _____
5%	R-STORE	\$ 20 X _____ = _____
	(Corner Mart)	\$ 100 X _____ = _____
1.5%	SHELL GAS	\$ 25 X _____ = _____

GROCERY STORES

3%	COUNTY MARKET	\$ 25 X _____ = _____
		\$ 100 X _____ = _____
5%	EDGAR IGA	\$ 25 X _____ = _____
		\$ 50 X _____ = _____
3%	FESTIVAL	\$ 50 X _____ = _____
3%	PIGGLY WIGGLY	\$ 25 X _____ = _____
3%	TRIGS	\$ 25 X _____ = _____
		\$ 50 X _____ = _____
		\$ 100 X _____ = _____

***** THANK YOU FOR YOUR ORDER !!!**

NAME _____

METHOD OF PAYMENT:

CASH () _____

TOTAL AMOUNT DUE \$ _____

CHECK () CHECK# _____ PHONE _____

***Make checks payable to St. John SCRIP

AMOUNT RECEIVED \$ _____

PAYMENT RECIEVED BY: _____

GIFT CERTIFICATE NO _____

OK TO SEND HOME WITH CHILD? YES ___ NO ___ NAME OF CHILD _____ GRADE _____

Parents/Grandparents of St. John School students only

DATE _____

Pay Period #4: January 6, 2020-March 29, 2020

Name of family to receive assistance credit _____