

ORDER FORM

UNFC Community Kitchen Rejuvenation Project -Framework- Order Form

Date: _____ P.O. #: _____

Purchasers Name/Title: _____

Contact Info/Shipping Address:

Billing Address, if different from Shipping:

Copies: \$ 15.00 Each (a donation to our Food Bank/Food Programming)

_____ X \$15.00 = \$ _____

PAYMENT TYPE:

Cheque Money Order Credit/P.O.# _____

Other: _____

Please make/send all payments to:

The United Native Friendship Centre

516 Portage Avenue

PO Box 752

Fort Frances, Ontario

P9A 3N1

Phone: 807-274-8541

Fax: 807-274-4110