




Re-Use Collection Program Patch Order Form

PAGE _____ of _____

DATE: ____/____/____

TROOP LEADER: _____ TROOP #: _____ COMMUNITY: _____

PHONE: _____ GIFTS CHAIR: _____

 <p>Girl Contact Information (Please print)</p> <p>Additional forms will be necessary for larger troops.</p>	Total Amount of Pounds Collected Please ✓					
	10 - 49 lbs.	50 lbs.	100 lbs.	150 lbs.	200 lbs.	Received
Name _____ Address: _____ City, Zip: _____ Phone: _____						
Name _____ Address: _____ City, Zip: _____ Phone: _____						
Name _____ Address: _____ City, Zip: _____ Phone: _____						
Name _____ Address: _____ City, Zip: _____ Phone: _____						
Name _____ Address: _____ City, Zip: _____ Phone: _____						
Name _____ Address: _____ City, Zip: _____ Phone: _____						

Please complete the Re-Use Collection Program Patch Order Form and email it to Lydia Sealey at lsealey@citrus-gs.org to receive your patches.