

# **STANDING SCRIP ORDERS FORM**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Retailer & Denominations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Amount of Each Order: \_\_\_\_\_

Approximate Frequency (Weekly or Monthly): \_\_\_\_\_

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