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Plaque Order Form

Please PRINT legibly

	Order Date			
Customer Name				
			CBDA Other _ Other	
Student Name				
School Name		All State 20		
Plaque	\$60	0.00 INCLUDES SH	IPPING	
Pay with check:				
Please enclose your check for	r \$60.00 made pag	yable to Banners & Awar	ds USA	
Pay with Credit/Debit Ca	ırd:			
Credit card number		Expiration	Security #	
Billing Address for card				
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