



CityTins 2017 FUNDRAISER

ORGANIZATION _____

RETURN ORDER FORM

\$30 EA.

TO: _____

BY: _____

ONLINE ORDERS: _____

LAST NAME	FIRST NAME	ADDRESS	QUANTITY:						TOTAL No. of TINS	TOTAL AMOUNT DUE
			MKE Resto	MKE Bar	MKE Arts	MSN Resto	MSN Bar	FOX Resto		

*Thank you for supporting local business and your community. Please make check payable to organization name listed above.