## WESTERN VARIETIES WHOLESALE INC.

Company / Social Committee Name:					DATE ORDER RECEIVED:				
					PAR	TY DATE:			
					DELI	VERY DATE:			
IS YOUR COMPANY GST EXEMPT?					If yes, please provide documentation on letterhead				
Company Address:					Invoice To (Accounts Payable Contact Name):				
City	Province		Postal (	Postal Code	Ema	Email:			
						Phone Number:			
Event Contact Information					Con	Contact for Day of Event (emergencies only)			
Contact Name:					Name:				
Phone Number:					Phone Number:				
Fax Number:					Office Number:				
Cell Number									
Email:									
Deliver To Address:					Pick up?				
		nplate is a	vailable o	n our websit	te under	Christmas Pa	CEL) at least 2 week arties. Send it back t	•	
	1 .1 .15.			is due upon	receipt	of invoice**			
Do you want us to pic	k the gifts								
Use last year's price?		Yes	No	New Pr	rice: \$				
Gift wrapped?		Yes	No	Labels	? Yes	No	Gender & Age	Name & Age	
FUN CHRISTMAS ADD-0	ON'S								
uJubes @ \$ 2.25 /bag Yes No					N	NOW MORE CANDY			
Gum Drops @ \$ 2.25 /bag Yes No						IN EACH	I BAG		
Surprise Loot/Gift Bags	S Yes	No							
Cost/bag	\$3.50	\$5	\$10	\$15	Other	\$			

I have read and agree to Western Varieties Wholesales terms and conditions located at www.westernvarieties.ca AUTHORIZED SIGNATURE:

www.westernvarieties.ca T: (780)439-1211 F: (780) 439-2811 <a href="mailto:christmas.westernvarieties@telus.net">christmas.westernvarieties@telus.net</a>