

Order for Office Supplies

Parish _____

Address _____

Town _____ Prov _____ Postal Code _____

Ordered by _____ Date _____

Signature _____

Supplier: Check <https://www.staples.ca/> and make your selection or send this form with the description and we'll do the shopping

Item SKU	Item Description	Qty.

Ship to:

Parish _____

Address _____

Town _____ Prov _____ Postal Code _____

Contact Name: _____

Ph: _____ email: _____

Bill to: same as "Ship to" **OR** (Parish) _____

c/o Archdiocese of Grouard-McLennan
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