

GREAT TRAIL COUNCIL SCOUT SHOP

FAX ORDER 1-330-773-4084

1601 S. Main St. Akron, OH 44301



Name: _____
(First) (M.I.) (Last)

Address: _____ City: _____

State: _____ Zip Code: _____

Telephone: _____ email: _____

Visa / Mastercard / Discover / **Store Acct.

Acct.#: _____ Exp.Date: _____

* Will pick-up on: _____ Approx.Time: _____
(date)

Item #	Description	Quantity	Item Price	Total Price

Unit # _____ Item Total \$ _____

Tax Exempt # _____ 6.75% Sales Tax \$ _____

Shipping & Handling (depending on size & weight of package) \$ _____

Total Due \$ _____

* Orders will be automatically shipped if not picked-up within 7 days of fax date.

** Authorized persons may charge sale to unit account. Please sign on Acct.# line for approval and note Unit #.