LEGION SUPPLY ORDER FORM

Branch 60, West Vancouver

580 18th Street, West Vancouver, BC V7V 3V7

Name: Mr Mrs Ms _____

Address: _____

Mailing Address (if diff. from above): _____

Phone: (Home) _____ (Bus) _____ (Cel) _____

E-Mail: _____ Membership # _____

Catalogue #	Description	Price	Quantity

The Legion Supply Officer will calculate the total amount owing, including taxes and shipping charges and will notify you. Payment is due on receipt of goods.

For Branch use ONLY:

_____

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