

Additional Vendors On The Other Side

NAME Denom Qty \$\$\$

RESTAURANTS (con't)

Little Ceasar's Pizza	8%	\$20		
McDonald's	2%	\$10		
Macaroni Grill	11%	\$25		
Marie Callender's	18%	\$25		
Mimi's Café	8%	\$25		
Olive Garden	9%	\$25		
Outback	8%	\$25		
Panera Bread	9%	\$10		
Papa John's Pizza	8%	\$10		
Pei Wei & PF Chang	8%	\$25		
Pickup Stix	12%	\$25		
Pizza Hut	8%	\$10		
Red Lobster	9%	\$25		
Red Robin	11%	\$25		
See's Candy	23%	\$16.10		
Souplantation	8%	\$25		
Starbucks	7%	\$10		
		\$25		
Subway	3%	\$10		
Wendy's	4%	\$10		

NAME Denom Qty \$\$\$

PRE-ORDER ITEMS

Pre-order items must be paid for in advance.

Big 5 Sporting Goods	8%	\$25		
Amazon.com	4%	\$25		
Bass Pro Shops	9%	\$25		
Build-A-Bear	8%	\$25		
Cheesecake Factory	5%	\$25		
Container Store	9%	\$25		
		\$100		
Dave & Buster's	13%	\$25		
Family Christian Store	9%	\$25		
Jo-Ann Fabrics	6%	\$20		
Marshalls	7%	\$25		
		\$100		
Michaels	4%	\$25		
Pet Smart	4%	\$25		
Ross Dress For Less	8%	\$25		
TJ Maxx	7%	\$25		
		\$100		
Visa Gift Cards	2%	\$25		
		\$50		
		\$100		

More items available - See catalog

<p>_____ I will pick up my Scrip</p> <p>_____ I want my child to receive my Scrip</p> <p>Parent Signature _____</p>	<p>_____ I will pick up my Scrip from Day Care</p>
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Please make checks payable to **NCA**.
and put in memo area "Scrip Order" and student's or staff member's name.

Returned Check Charge: \$30 for each item returned.

For Office Use Only:

Check Nos.	Amount	Total Amount Received \$ _____
Cash Amount:		

Items Backordered:

Vendor	Denom.	Qty	\$\$	Date Filled: