


Use of this form constitutes acceptance of the currently effective prices and conditions for Buying Club orders.

Orders must be in by 8 pm on Sunday in order for you to receive your items by that same Wednesday. No email, phone, or verbal orders. Please pick up order ASAP.

Last Name: _____ **First Name:** _____ **Phone #:** _____ **DATE:** _____

						ORDER TOTALS			OFFICE USE ONLY			
Brand		5-Digit Product Code (not UPC)	Product Description	Pack Size	How Many?	Price		Food Non-Taxable	Non-Food Taxable		Non-Taxable	Taxable
1						X	=		or	<input type="checkbox"/>		
2						X	=		or	<input type="checkbox"/>		
3						X	=		or	<input type="checkbox"/>		
4						X	=		or	<input type="checkbox"/>		
5						X	=		or	<input type="checkbox"/>		
6						X	=		or	<input type="checkbox"/>		
7						X	=		or	<input type="checkbox"/>		
8						X	=		or	<input type="checkbox"/>		
9						X	=		or	<input type="checkbox"/>		
10						X	=		or	<input type="checkbox"/>		

TOTAL =

- USERNAME:** SLOBuyingClub **PASSWORD:** OwnerPerks4me

<div style="display: flex; justify-content: space-around;"> <div style="border: 2px solid black; width: 150px; height: 100px; margin: 5px;"></div> <div style="border: 2px solid black; width: 150px; height: 100px; margin: 5px;"></div> </div>		OFFICE USE ONLY ACTIVE MEMBER?	
Total Non-Taxable	Total Taxable	Non-Taxable	Taxable
Cashier's initial & date below as each is completed	TOTAL COST =		
	DEPOSIT PAID =		
	Balance or Refund Due =		
	CRV =		

Location: WALK-IN FREEZER B.C. SHELF



**1494 Victoria Ave., San Luis Obispo
805-544-7928 * www.slofood.coop**

PINK: Customer Copy

YELLOW: Attach to product

WHITE: Store Copy