

SCRIP ORDER FORM

BUSINESS	PROFIT	\$\$	QTY	TOTAL \$\$
Grocery Stores circle				
Copps (Pick n Save)	4%	25/100		
Cub Foods	2%	25/100		
Miller and Sons	5%	25/100		
Piggly Wiggly	3%	25/50/100		
Sentry	3%	10/50		
Whole Foods	5%	25/100		
Woodman's	5%	50/100		
Gas Stations				
BP	2%	50/100		
Exxon/Mobil	1.5%	50		
Kwik Trip	4%	20 / 100		
PDQ	5%	25/ 100		
Superamerica /Speedway	4%	25 /100		
Retail Stores				
American Eagle	10%	25		
American TV (allow 1 week)	5%	500 min.		
Barnes and Noble	9%	10 / 25		
Bath and Body Works	13%	10 / 25		
Bed Bath Beyond	7%	25		
Best Buy	3%	25 / 100		
Build-a-Bear Workshop	8%	25		
Claire's	9%	10		
Dick's Sporting Goods	8%	25		
Gap/Old Navy/Banana Republic	9%	25		
Great Clips	8%	25		
Home Depot	4%	25/ 100		
JoAnn Fabrics	6%	20		
JC Penney	5%	25 / 100		
Kohls Dept Store ****	4%	25/100		
Lands End (can be used at Sears)	17%	25/100		
Macy's	10%	25/100		
Marshalls/TJ Maxx	7%	25/100		
Menards	3%	25 / 100		
Pottery Barn/Wm Sonoma	8%	25/100		
REI	8%	25		
Shopko	3%	25/50		
SuperCuts	8%	25		
Walgreens	6%	25/100		
Wal-Mart/Sam's Club	2%	25/100		
Entertainment				
Family Video	12%	10		
Itunes card	5%	15/25		
Marcus Theatre	9%	25/100		
Ten Pin Alley	20%	10/25		
Vitense Golf Land	10%	10/25		

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Food/ Restaurant circle				
Applebee's	8%	25/50		
Babes Restaurant	10%	25		
Chuck E Cheese	8%	10		
Cold Stone Creamery	8%	10		
Cousins Subs	9%	10		
Culver's	10%	10		
Chili's	11%	25		
Little Caesars	8%	20		
Noodles and Company	8%	10		
Olive Garden	9%	25		
Outback/Fleming's	8%	25		
Panera Bread	9%	10/25		
PF Changs	7%	25		
Pizza Hut	8%	10		
Red Robin	9%	25		
Subway	3%	10		
Starbucks	7%	10 / 25		
Victor Allen's	10%	10 / 25		
Vintage Brewing Co.	10%	25		
Write in your own from gscrip.com				
TOTAL ORDER	XXX	XXX		

****May be used to pay store credit card accounts.

NAME: _____ PHONE: _____

Orders due by 9:00 am Tuesday
For distribution Friday

Make checks payable to SMG **Check Number:** _____

By signing below, I authorize SMG to release Scrip to

student name _____ grade/teacher _____

(signature) _____

EMAIL: _____

Entered by: _____ Filled by: _____ Checked by: _____