

El Paso High School Personalized Tile Order Form

DATE: _____ / ____ / ____

REP. _____

ORDER No. _____

NAME: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: HOME- _____ WORK- _____ CELL- _____

E-MAIL: _____

Please add \$ _____ as an additional contribution to EPHS 100 to help beautify our beloved campus.

Lettering

Line 1: Maximum 20 Spaces

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Line 2: Maximum 20 Spaces

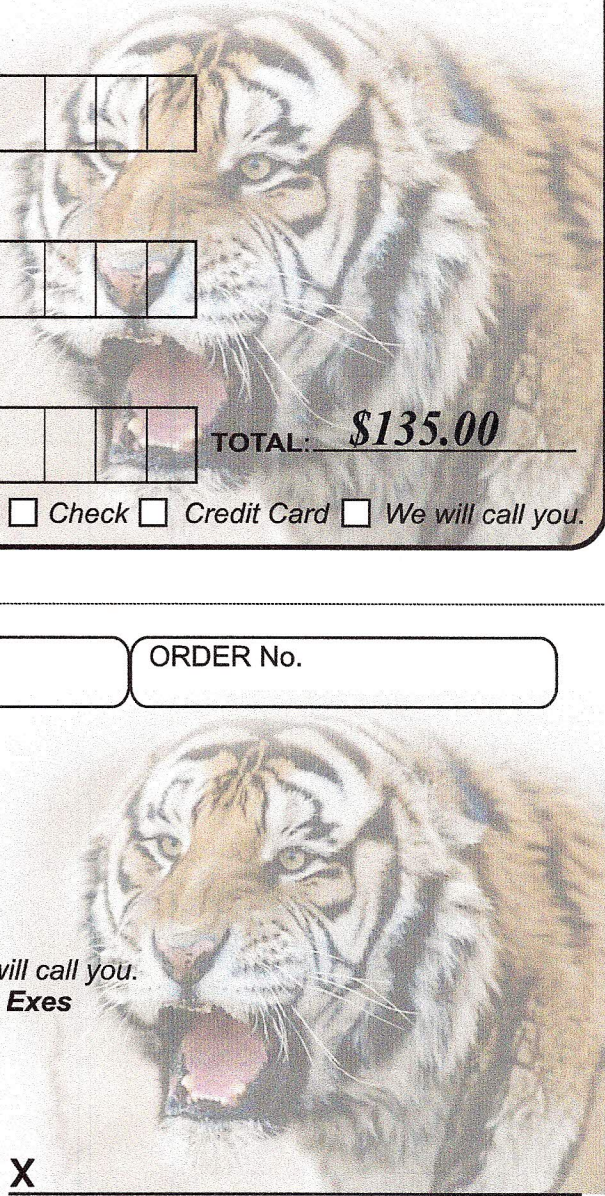
--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Line 3: Maximum 20 Spaces

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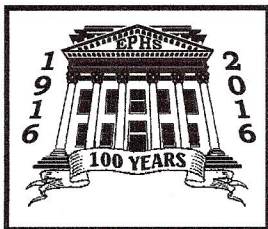
TOTAL: **\$135.00**

Add: \$3. For each additional Character/Space over the initial 60. Cash Check Credit Card We will call you.



Receipt

REP. _____ ORDER No. _____



RECEIVED: \$ _____ Cash Check Credit Card We will call you.
Make Check payable to: **EPH Friends & Exes**

FROM: _____
FOR INFORMATION: SANDY AARONSON, Treasurer
(915) 588-7888
sandyaarsonson@gmail.com

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