

NAME Stephanie Miller DATE: _____

(to appear on the tag)

TEAM: CNYELC_ 15 LEVEL: HS JERSEY # : 7

(PLEASE PRINT CLEARLY)

NAME	<u>Steve Miller</u>
STREET	<u>9 Commane Rd</u>
CITY, STATE, ZIP	<u>Baldwinsville, NY 13027</u>

	TYPE	QTY	COST	TOTAL
Bag Tag	_____	<u>1</u>	<u>\$ 7</u>	\$ <u>7</u>
	<u>G</u>	<u>1</u>	<u>\$ 7</u>	\$ <u>7</u>
5x7 Photo	_____	_____	_____	\$ _____
	_____	_____	_____	\$ _____
Shipping				\$ 2.00
Final Cost of Order (tax inc)				\$ <u>16.00</u>


Steven H. Miller
 9 Commane Rd. Baldwinsville, NY 13027
 (315) 635 - 8316

www.CSGWORKS97.com email : CSGWORKS97@aol.com

f you are ordering a GOOFY item write G in the "TYPE" column, otherwise a NORMAL version will be made