

# Wisconsin Hobby Craft Package Program - Order Form

## Ship to:

Sorry, we cannot send orders from one inmate to another

Inmate Name: \_\_\_\_\_ ID#: \_\_\_\_\_  
(Please Print)

Institution/Dorm/Housing#: \_\_\_\_\_  
 \_\_\_\_\_

Street Address: \_\_\_\_\_  
(P.O. Box is not accepted) (Please Print)

City, State, Zip: \_\_\_\_\_  
(Please Print)

## Senders Information

\*We can't fill order without this information\*

Name: \_\_\_\_\_  
(Please Print)

Street Address: \_\_\_\_\_  
(Please Print)

City, State, Zip: \_\_\_\_\_  
(Please Print)

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_  
(You will receive an e-mail confirming the order was received and an e-mail when the order ships)

	Item Number	Quantity	Size	Color	Description	Unit Price	Total Price
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							

Merchandise Total	
(See chart on back of page for different tax rates)	
Total	

