



Law Enforcement Torch Run® T-SHIRT ORDER FORM (short sleeve only)

Distribution:

(Person responsible for proceeds and t-shirts)

Shipped to:

Name: _____
 Agency: _____
 Address: _____
 City, State, Zip: _____
 Phone: wk _____ hm _____ fax _____
 E-Mail : _____

Law Enforcement Torch Run T-Shirts

	Ordered	Sent	Balance
Small	_____	_____	_____
Medium	_____	_____	_____
Large	_____	_____	_____
X-Large	_____	_____	_____
2X-Large	_____	_____	_____
3X-Large	_____	_____	_____
Total T-Shirts	_____	_____	_____

Internal use only

Order #

Number of Shirts Distributed _____ Cost of Shirts Distributed \$ _____

Date Distributed _____ Shipped Via _____