

Signature: _____

Starter Package

Qty. Description

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1 All items below are required. Please "Pick and Choose" what you need to purchase:

Cost of Starter Package	\$ 0.00
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Items required by teacher and to be ordered if you do not already have them

Description	Qty. Req'd	Price	Qty. Ordered	Subtotal
School Start 5 Index Dividers (insertable tabs)	1	0.95	_____	_____
School Start Report Cover (3 Prong) - Assorted Colours	10	0.49	_____	_____
School Start Lined Looseleaf Refill Paper - 150 Sheets	2	2.13	_____	_____
School Start 7 mm Ruled Exercise Book (10 7/8" x 8 3/8") - 80 Pages	1	1.89	_____	_____
School Start 2" Binder - Assorted Colours	2	6.38	_____	_____
Bic Pen (medium red)	2	0.26	_____	_____
Bic Pen (medium blue)	2	0.26	_____	_____
Staedtler Norica HB #2 Pencils (pre-sharpened) - 12 pack	4	3.58	_____	_____
School Start Pocket Highlighter (Assorted Colours)	2	0.72	_____	_____
Staedtler Coloured Pencils (pre-sharpened) - 24 pack	1	6.13	_____	_____
School Start 5" Pointed Scissors	1	3.05	_____	_____
School Start White Premium Eraser	3	0.69	_____	_____
School Start Clear Glue Stick - 21 g.	2	1.54	_____	_____
School Start Clear Plastic Ruler (inches/cm) - 12"/30 cm	1	0.90	_____	_____
School Start Clear Plastic Protractor - 4"	1	0.78	_____	_____
School Start One Hole Pencil Sharpener w/ Container	1	2.51	_____	_____
School Start Dual Power Calculator	1	4.05	_____	_____
School Start 3 Ring Pencil Pouch (9.75" x 7.5") - Asst. Colours	1	3.31	_____	_____
Royale Facial Tissue (2 Ply) - 126 Sheets	1	2.31	_____	_____
Maxell Stereo Headphones	1	5.72	_____	_____
Sheet of Personalized Student Labels	1	1.31	_____	_____

** Please label all items EXCEPT the duotangs**

Cost of Required Items	(prices include tax)	\$
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Shipping	\$ 7.50
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Total Cost (Starter Package + Required Items + Shipping)	(prices include tax)	\$
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Contact Info / Payment

Student Name (label to appear on supply box) _____ Phone Number _____ Email (summer contact info) _____

By Credit Card Payment: Visa Mastercard Cheque (made payable to: School Start)

Card Number _____ CVV _____ Expiry Date _____ \$

Name as it appears on card _____ Signature _____ Amount _____

Your Order Will Be Delivered To Your Home. Please provide your house and street address. No P.O. Boxes.

Address _____ City _____ Province _____ Postcode _____