

**COFFEE PURCHASE FORM**

**Group Name** \_\_\_\_\_

**Representative Name** \_\_\_\_\_

**Contact Number** \_\_\_\_\_

Number of bags purchased @ \$5.00 each \_\_\_\_

**TOTAL \$**\_\_\_\_

I authorize RHA to debit our account in the amount of \$\_\_\_\_

\_\_\_\_ Attached is check# \_\_\_\_\_ in the amount of \$\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_