

MONSIEUR RAFAEL



Exceptional oils and vinegars, adopted by great Quebec chefs.

40% Profit

- Free shipping
- 1 case minimum (12 bottles)
Can mix bottles to make a full case
- \$28.00 retail

THE INGREDIENTS OF YOUR SUCCESS



Profitability



Exclusivity



Gourmet quality



Long preservation



STEPS FOR A SUCCESSFUL FUNDRAISER:

1. Fill out this form with the names and phone numbers of relatives, friends and neighbours who you think would support your cause.
2. Call, text or visit each person from your list communicating your goal and reason for fundraising. Use social media to reach more supporters!
3. Ask if they would like to support your cause and if YES - ask them what they would like to buy.
4. Collect cash, cheque, or e-transfer from your supporters. Any cheques are made out to your organization.
5. Hand in your form and the money collected to your fundraising coordinator on the due date. Keep a copy of this form for yourself - take a photo with your smartphone.

Name of Participant: _____		<div style="display: flex; justify-content: space-around;"> <div style="background-color: black; color: white; padding: 5px; transform: rotate(-45deg); text-align: center;">1 Apple balsamic 250 ml</div> <div style="background-color: black; color: white; padding: 5px; transform: rotate(-45deg); text-align: center;">2 Apple & maple balsamic 250 ml</div> <div style="background-color: black; color: white; padding: 5px; transform: rotate(-45deg); text-align: center;">3 Les Trilles olive oil with truffles 250 ml</div> <div style="background-color: black; color: white; padding: 5px; transform: rotate(-45deg); text-align: center;">4 Toro Albalá Balsamic Vinegar 200 ml</div> <div style="background-color: black; color: white; padding: 5px; transform: rotate(-45deg); text-align: center;">5 Les Trilles olive oil 750 ml</div> </div>					
Phone # of Participant: _____							
Name of Organization: _____							
Teacher's Name/Class #: _____							
Order Deadline: _____							
Name	Contact Info	\$28	\$28	\$28	\$28	\$28	AMOUNT PAID
<small>Please Print</small>							
Total for each Column							

Please contact True North Fundraising to get started!



RETURN ORDER FORM BY: _____

PICK UP TIME & DATE: _____

PICK-UP LOCATION: _____

COORDINATOR'S NAME: _____

COORDINATOR'S PHONE #: _____

CHEQUES PAYABLE TO: _____

**Thank You for
your support!**

SELLER'S SIGNATURE: _____

TOTAL # OF TUBS SOLD	
TOTALS SUBMITTED	

Extra shipping fees may apply in certain areas (ask your fundraising consultant)