



# Hassle Free Backpacks

## Order Form - 2026

PO BOX 4486, CLEARWATER, FL 33758 \* TEL. (727)536-2273 Fax: (727)461-3985  
 PHYSICAL ADDRESS: 21903 US HWY 19 N, CLEARWATER, FL 33765

### Early Bird Order Deadline - May 31st

Pick up time and date will be by appointment July 8th-August 3rd

Fax completed forms to SCTB at (727) 461-3985 or scan and email to admin@sctb.org

### Backpack Only Order

Early Bird Column		June Order Column		July Order Column	
Early Bird orders received by 5/31 suggested donation \$8.00		Orders received 6/1- 6/30 suggested donation \$9.00		Orders received 7/1-7/31 - suggested donation \$10.00	
Quantity	Total	Quantity	Total	Quantity	Total
Grades K-5	\$	Grades K-5	\$	Grades K-5	\$
Grades 6-12	\$	Grades 6-12	\$	Grades 6-12	\$
<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>

### Backpack with Supplies

Early Bird Column		June Order Column		July Order Column	
Orders received by 5/31 suggested donation \$10.50		Orders received from 6/1 to 6/30 suggested donation \$11.50		Orders received 7/1-7/30 suggested donation \$12.50	
Quantity	Total	Quantity	Total	Quantity	Total
Grades K-5	\$	Grades K-5	\$	Grades K-5	\$
Grades 6-12	\$	Grades 6-12	\$	Grades 6-12	\$
<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>	<b>TOTAL</b>	<b>\$</b>

Filled backpacks **may** contain the following school supplies: pencils, paper, ruler, glue stick, erasers, crayons, pens, and two-pocket folders. Both small and large bags come in assorted colors, we cannot order by specific color.

(Please note on your order if you need your bags by a certain date)

Church/Ministry		Phone	
Name of Contact		Fax	
Address		City	
State, Zip Code		Email	

Shipping cost for orders with supplies (not pick-ups from our location) will be charged depending on size of order.

TOTAL: \_\_\_\_\_

TOTAL: \_\_\_\_\_

BACKPACK TOTAL: \_\_\_\_\_

Make checks payable to: **Somebody Cares Tampa Bay**

NEW TOTAL: \_\_\_\_\_

**IMPORTANT** \*\*Checks must be received by the appropriate date to honor your order. \*\*

Complete the following to pay by credit card: CC# _____ code _____
Name as it appears on the card _____ Exp date _____
Billing Address _____ City _____ St _____
Phone _____ E-mail _____ Zip _____

I need my bags by this date _____ for my outreach. Additional Notes: _____
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