

Logo Pin Order Form

County _____

Date _____

Total Number of Pins and Drops Ordered _____ x \$ 3.00 = \$ _____

(Make check payable to the Arkansas Extension Homemakers Council.
Send only one check. Orders with more than one check will be returned.)

Quantity

Logo Pins	
President Drop*	
Vice President Drop*	
Secretary Drop*	
50-Year Pins	

Quantity

Treasurer Drop*	
Past President Drop*	
Vice President Drop*	
Secretary Drop*	

***The drops fasten onto the logo pins. They cannot be displayed without the pin.**

Name of Person to Receive the Order _____

Address _____

City/State/Zip Code _____

Telephone Number _____