Boxes for Bongolo Hospital

Church Name:	
Church Address:	
City, State, Zip	

Contact Name:	
Contact Phone #:	
Contact Email:	

TOTAL NUMBER OF BOXES SENT:	

Box #		**Height:**		**Length:**		**Width:**	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Box #		**Height:**		**Length:**		**Width:**	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Box #		Height:		Length:		Width:	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Box #		Height:		Length:		Width:	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Box #		Height:		Length:		Width:	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Box #		Height:		Length:		Width:	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Box #		Height:		Length:		Width:	
Quantity		**Item Description & Cost Per Item**					**Total Cost**

Please send $15 per cubic foot to cover shipping costs to: Christian & Missionary Alliance, Finance Department, 6421 E Main St, Reynoldsburg OH 43068. Thank you!