

Courage2Report Order Form

Email to courage2reportmo@mshp.dps.mo.gov

Promotional/Marketing Items

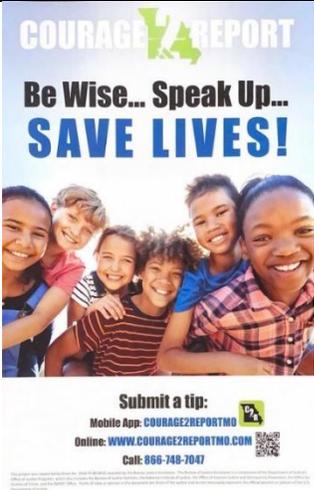
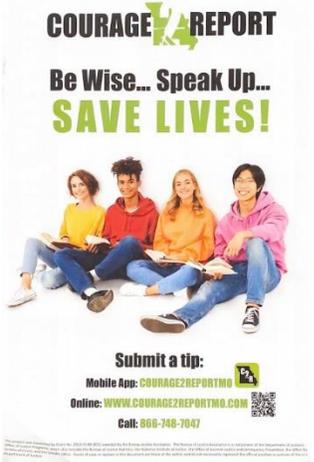
District: _____

Requestor: _____

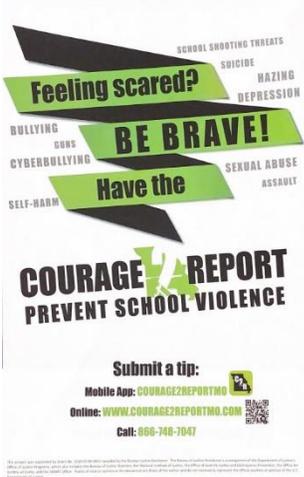
Address: _____

Date Requested: _____

Date Sent (For C2R Office Only): _____

Posters		Amount Requested	Amount Sent (For C2R Office Only)
Poster 1			
Poster 2			

Poster 3			
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Poster 4			
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Other Items	Amount Requested	Amount Sent (For C2R Office Only)
Magnets		
Brochures		
Pencils		
Stickers for Laptops/Water Bottles		
Bookmarks		