

GESC SECONDARY ROOM 5 & 6 YEARS 7 - 9 2025

Students Name..... Phone.....
Parents Name..... Email.....

Item	Code	Please tick required items	Qty	Price ea	Subtotal
PERSONAL ITEMS LIST					
DIARY STUDENT COLPLAN 2025 A5 WTV	86333	<input type="checkbox"/>	1	2.65	\$2.65
DISPLAY BOOK MARBIG A4 20 PAGE REFILLABLE ASSTD COLS	2007099	<input type="checkbox"/>	4	1.75	\$7.00
DIVIDERS MARBIG A4 P/P MULTI COL'D 10 TAB	35020	<input type="checkbox"/>	1	2.50	\$2.50
EXERCISE BOOK SOVEREIGN A4 8mm 96 Page RULED	97096	<input type="checkbox"/>	8	1.50	\$12.00
GLUE STIC UHU RENATURE 40GM	33-00047	<input type="checkbox"/>	5	2.60	\$13.00
GRAPH BOOK WRITER PREMIUM A4 96pg 10mm HAT	22753	<input type="checkbox"/>	1	1.90	\$1.90
ERASER FABER CASTELL LARGE DUST FREE WITH SLEEVE	82-187177	<input type="checkbox"/>	4	0.75	\$3.00
EVER ARCH FILE A4 REINFORCED SPINE BLACK MOTTLE	63070M	<input type="checkbox"/>	1	4.30	\$4.30
MARKER TEXTA NYLORITES ASST WLT12	49872	<input type="checkbox"/>	1	2.45	\$2.45
PEN BIC BP CRISTAL MED BLUE	04243	<input type="checkbox"/>	10	0.40	\$4.00
PEN BIC BP CRISTAL MED RED	04242	<input type="checkbox"/>	5	0.40	\$2.00
PEN BIC BP CRISTAL MED BLACK	04241	<input type="checkbox"/>	5	0.40	\$2.00
PENCIL COLOURED TEXTA 12`S	0245810	<input type="checkbox"/>	1	2.95	\$2.95
PENCIL GRAPHITE FABER 1111 HB	12-111100	<input type="checkbox"/>	10	0.25	\$2.50
SHARPENER FABER WAVE 2 HOLE WITH CATCHER	81-50346	<input type="checkbox"/>	1	1.60	\$1.60
SHEET PROTECTORS MARBIG H/DUTY A4 BOX100	25100	<input type="checkbox"/>	1	14.10	\$14.10
WHITEBOARD MARKER FABER CONNECTOR Asst Cols Wlt4	67-1592044	<input type="checkbox"/>	2	8.35	\$16.70

SUBTOTAL **\$94.65**

PLEASE NOTE: PARENTS MARK ITEMS CLEARLY WITH CHILDS NAME.

IN ADDITION TO THE ABOVE - PARENTS TO SUPPLY

4 x LARGE BOXES OF TISSUES

IF YOUR CHILD WEARS NAPPIES PLEASE PROVIDE NAPPIES AND WIPES ON A WEEKLY BASIS

HANDLING/PACKAGING FEE	H/PK	<input type="checkbox"/>	1	3.00	\$3.00
DELIVERY FEE	Delivery	<input type="checkbox"/>	1	10.95	\$10.95

ORDER TOTAL:

**PLEASE NOTE: To guarantee prices quoted and supply of all items, please ensure orders are placed by due date.
PLEASE RETAIN YOUR RECEIPTS AS PROOF OF PURCHASE.**

OFFICE USE ONLY

Date:..... Amount Paid:..... Sales Assistant:.....