



Kapi'olani Children's Miracle Network Supply Order Form

Date: _____

To: Hoku DeFeo
Coordinator
Kapi'olani CMN
Phone: (808) 535-7981

Fax: (808) 535-7111

SuppliesQuantity

Paper Miracle Balloon (6 inch – bundles of 100)

Paper Miracle Balloon (14 inch – bundles of 100)

Latex Balloons (bag of 250)

Mylar Balloons (red, yellow, or blue)

Buttons "Give a Little, Help a Lot" (photo of kids/baby)

Canister plastic w/screw top

Stickers "Give a Little, Help a Lot" (2-inch round/500 roll)

Removable Counter/Window Cling (4"x6")

Stickers "Kapiolani CMN Miracle Balloon"

CMN Pens

Goal Poster with Champion

2023 Champion Poster (11"x17")

2023 Champion X-Banner (5'4" with stand)

2023 Champion pins with story card

Other _____

Contact Name: _____ Contact Phone: _____

Contact Email: _____

Partner/Company: _____ Store Location: _____

Address: _____

City, State, Zip: _____

Campaign Dates: _____ *Need By Date: _____

*to ensure timely delivery, EMAIL form to hoku.defeo@hawaiiipacifichealth.org
at least 2 weeks before "NEED BY" date.