

## **RED ZONE RECONDITIONING**

PRICE • QUALITY • SERVICE • INTEGRITY

**Ship To:** 105 Metro Drive, Anderson, SC 29625 Phone: 864-643-9222

| <b>Customer/ Account Information</b>                 |   |
|--|---|
| Contact Name:*                                       | Title   |
| School/Organization Name:*                           |   |
| Street Address:*                                     |   |
| Street Address 2:                                    |   |
| City:* State   | e:* Zip:*   |
| Business Phone #:*                                   | Email Address:*   |
| Shipping Information (only if different f            | rom above)  |
|  | Title   |
| School/Organization Name:*                           |   |
| Street Address:*                                     |   |
| Street Address 2:                                    |   |
| City:* State   | e:* Zip:*   |
| Order Details:  Total # of Facemasks* Total # of Box |   |
| New Color:   | If left blank, facemasks will be recoated in original color. Please contact us for assistance regarding color options/requirements/special needs: 864-643-9222.                     |
| Additional Instructions or Comments:                 |   |
| Payment Method:                                      | it Card (3% fee)  |
| during the months of April-July.                     | ese shipped facemasks.  weeks to complete ( <b>not</b> including shipping time). <i>Please Allow extra time</i> of my reconditioned masks unless prior arrangements have been made. |
| Authorized Signature:                                | Title:  |
| Print Name   | Date  |

PLEASE PRINT THIS FORM, SIGN, AND INCLUDE WITH YOUR SHIPMENT

IF SHIPPING IN MULTIPLE BOXES, PLEASE INCLUDE A COPY OF THIS FORM IN EACH BOX