*Connecting Communities*
*One Trail at a Time*

# Safety Vest Order Form

Date: _____

**Customer Information ->>**

**(Please Print)**

Name: _____

Company: _____

Address:_____

City:_____ State: ___ Zip:_____

Phone: _____

**Three Available Sizes:**
**Small/Medium**
**Large/X large**
**2X large/3X large**

**All sizes are $37.00 each**

| | | | | | | |
|---|---|---|---|---|---|---|
| | | | | | | |

| Qty | Name on Vest | Size | Unit Price | | Line Total |
|---|---|---|---|---|---|
| | | | $37.00 | | |
| | | | $37.00 | | |
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| | | | $37.00 | | |
| | | | $37.00 | | |
| | | | | | |
| | | | | Subtotal | |
| | | | | Sales Tax | n/a |
| | | | | Total | |

***Make all checks payable to: Illinois Traction System Trail Committee***

***Mail check and Order Form to:***

*Illinois Traction System Trail Committee ~ 916 North Easton St.~ Staunton, IL 62088*

*877-839-8062 info@its-trail.org*

*Thank you for your support!*