



**DATE:**

**BUSINESS NAME:**

**ADDRESS:**

**EMAIL & PHONE NUMBERS:**

**CONTACT PERSON:**

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**Order Quantity Requested**

\_\_\_\_ **SANITIZER** (Minimum 1 - 16.9 oz Jar / Maximum 1 Case)

\_\_\_\_ **MASKS** (Minimum 50 / Maximum 200)

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**PICK UP TIMES FOR WILLITS CHAMBER OF COMMERCE / 299 E. Commercial ST., WILLITS  
(707) 459-7910**

**TUESDAY, WEDNESDAY AND THURSDAY – 10 AM-12 PM / 1 PM-3 PM**

**PICK UP AT COURTYARD NEXT TO VISITOR CENTER**

**(Please allow 24-48 hours to fill your order – until November 2020 or while supplies last)**

**DATE OF PICK UP –**

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**Are you member of the WILLITS CHAMBER OF COMMERCE?**

**no**

\_\_\_\_ **yes** \_\_\_\_

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**Number of Employees in your Business: \_\_\_\_\_**