

This Stain Needs Special Attention

Name: _____

Street Address: _____

Contact Number: _____

Garment Type and Color: _____

Type of Stain: _____

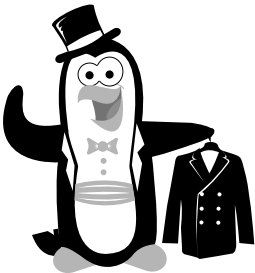
Location of Stain: _____

How long ago did the stain occur? _____

Have you or another cleaner attempted to remove the stain?

Yes No

If Yes, what was used to treat the stain? _____



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