

# SUMMIT REALTORS® PPE STORE

All of the things you need to keep you, your buyers, and seller safe.



Enter the qty of each item, complete payment authorization, then email form to [mikel@sarsummit.com](mailto:mikel@sarsummit.com) to set up curbside pick-up!

**Mandala Face Mask**  
\$12.60 each  
Antimicrobial + Fluid Resistant Face Mask with 3 BFE PM2.5 Filters



Navy # of each  
 Royal Blue # of each  
 Gray # of each

**KN95 Respirator**  
\$12.50 (Pack of 5)  
Protective Mask, Bacterial Filtration efficiency >95%




# of packs

**Disposable 3Ply Face Mask**  
\$42.70(50 pcs)  
Safe Shield Technology, with Ear Loops and Nose Clip



# of Boxes

**3 Layer Logo Face Mask**  
\$8.30 each  
Cotton with two layers of antimicrobial mesh inner layer. The ear loops have a small rubber slider to adjust this mask. With REALTOR® R Logo.



# each

**Mandala Face Mask Filter**  
\$6.00 (pack of 10)

Qty

**Masks Made Here Face Mask**  
\$12.00 each  
Dual-layer, Washable



Black # of each  
 Indigo # of each  
 Blend # of each

**Disposable Shoe & Boot Covers**  
\$5.99(10 pack, 5 Pairs)  
Waterproof Slip Resistant



# of Packs

**AllShield Hand & Surface Sanitizer**  
\$9.50(1) 8 oz Bottle  
70% alcohol formula




# of Bottles

**Anti-Bacterial Wipes**  
\$6.10 (3 Packs of 10)  
Alcohol-free and clinically tested for 99.9% anti-bacterial.



# of Packs

**REALTOR® PPE Pack**  
\$6.80 each  
Contains 1 disposable mask, 1 pair of gloves, and 1 personal 1 oz spray sanitizer (80% alcohol, liquid), all packaged neatly in an FDA approved barrier bag with re-closable zipper.



# of each

**CREDIT AUTHORIZATION**

Name as it appears on the Credit Card: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Credit Card Billing Address: \_\_\_\_\_  
 Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Credit Card Type:  Amex  Discover  Master Card  Visa  
 Credit Card #: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

I AUTHORIZE SUMMIT REALTORS® to charge my American Express, Discover, Master Card or Visa for the following selected charges:

Total \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Once Payments are run, this form is destroyed for your protection.

