## **Knife Sharpening Service**



Name:				
Company Name:_				
Address:				
City:		State:	Zip:	
Country:		Phone:		
Email:				_
PO #:		# of Knives Shi	pped:	
Comments:				
		↑ Place Inside Bo	ox ↑	
<b>&gt;</b> <	↓ Attach S	hipping Label To O	utside Of Box ↓	

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