

Record of Purchase

Consult your dealer for the following information:

Quantity	_____
Date of Purchase	_____
Carpet Retail Store	_____
Phone Number	_____
Salesperson	_____
Carpet Manufacturer/Brand Name	_____
Private Label Company	_____
Phone Number	_____
Product/Style Name	_____
Color	_____
Type of Fiber/Brand	_____
Fiber Producer	_____
Phone Number	_____
CRI Testing Label, Product Type#	_____
Installer	_____
Company	_____
Date of Installation	_____
Phone Number	_____
Warranties	_____
Cleaning Recommendations from Manufacturer	_____
Carpet Cleaning Company	_____
Cushion Type/Producer	_____