

LOS RIOS COMMUNITY COLLEGE DISTRICT

PURCHASE ORDER NO 0001085523

PURCHASING: (916) 568-3071 • FAX: (916) 568-3145
 ACCOUNTING OPS: (916) 568-3065 • FAX: (916) 286-3636

PLEASE SEE REVERSE SIDE FOR TERMS AND CONDITIONS.

Date 02/19/2016	Revision	Page 1
Payment Terms NET 30	Freight Terms Shipping Point	Ship Via Best Metho
Reference: 1007687 PLEWS J ROUILLER S		Location / Dept 04GYM PE/H/A

Supplier: 0000037272
 UNITED VOLLEYBALL SUPPLY LLC
 14615 NE 91ST STREET BLDG B
 REDMOND WA 98052

Phone: (425) 576-8835
Fax: (425) 827-2230

email: info@volleyballusa.com

Ship To: FOLSOM LAKE COLLEGE
 RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630-6798
 United States

Bill To: 1919 Spanos Court
 Sacramento CA 95825-3981
 United States

<u>Tax Exempt?</u> N	<u>Use Tax Applicable:</u> Y					
<u>Line-Sch</u>	<u>Item/Description</u>	<u>Quantity</u>	<u>UOM</u>	<u>PO Price</u>	<u>Extended Amt</u>	<u>Due Date</u>
1- 1	VELCRO NET TAPE, ARTWORK-DIGITAL PRINT TOP TAPE ONLY, SPECIFY 7"	1.00	EA	285.00	285.00	03/04/2016
2- 1	SHIPPING AND HANDLING	1.00	EA	21.10	21.10	03/04/2016

PER QUOTE# 30102

Sub Total Amount	306.10
Sales Tax Amount	0.00
Total PO Amount	306.10

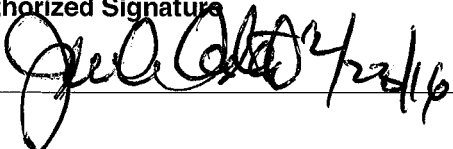
<u>BU</u>	<u>Acct</u>	<u>Fd</u>	<u>Org</u>	<u>Prog</u>	<u>Sub</u>	<u>Proj</u>	<u>Amount</u>	<u>BYear</u>
GENFD	6490	12	FL.VI.IEQP	08700	00000	548F	306.10	2016

0001007687KIRKLINK18-FEB-2016

Verification of this purchase order can be made using the Los Rios Community College District web site listed below. If you have any questions, please contact the Purchasing Office at (916)568-3071.

<http://www.losrios.edu/purchasing/povalidation>

All shipments, invoices, and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to shipment.

Authorized Signature


Notice to vendor: You are responsible for delivering goods and delivery documents to the Receiving Department at the site. Failure to do so will delay payment processing. Vendor is responsible for obtaining verification of delivery by authorized Receiving Room personnel. Receipt of goods by other parties and failure to obtain authorized signatures may also delay payment. NOTE: PAYMENT TERMS NET 30
 MATERIAL SAFETY DATA SHEETS (MSDS) must be provided with the delivery of product as required by law.

LOS RIOS COMMUNITY COLLEGE DISTRICT

American River College • Cosumnes River College • Folsom Lake College • Sacramento City College

PURCHASE ORDER TERMS AND CONDITIONS

1. **APPLICABLE LAW:** The contract resulting from this order shall be governed by the laws of the State of California
2. **COMPLETION OF ORDERS:** LRCCD reserves the right to withhold payment until order is completed.
3. **DISCOUNTS:** Please show cash payment discount offered on your invoice in connection with any discount offered, time will be computed from date of delivery of the supplies or equipment, or from date correct invoices are received in the office specified by LRCCD if the latter date is later than the date of delivery. Payment is deemed to be made for the purpose of earning discount, on the date payment is mailed or on behalf of LRCCD.
4. **INVOICES:** Invoices shall be prepared and submitted in duplicate unless otherwise specified. Invoices shall contain Purchase order number, date, description of items, sizes and quantities, unit prices, extended totals, place and date of delivery. Invoices or vouchers not on printed bill heads shall be signed by the CONTRACTOR or person furnishing the supplies or services. Every invoice shall be properly itemized. If LRCCD has not received billing for product or services within a one year period LRCCD will not be held responsible for satisfying the debt.
5. **CHANGES:** No change or modification in terms, quantities, or specifications may be made without express authorization in writing from the LRCCD Purchasing Office and signed by the parties hereto, and no oral understanding or agreement not incorporated herein shall be binding on any of the parties hereto. If unit cost of any item exceeds the amount shown by 10% or \$250.00 whichever is less do not ship. Contact LRCCD Purchasing at the phone number provided.
6. **BILL OF LADING:** If Bill of Lading is applicable to this order, send originals to "Ship to" address and duplicate Bill of Lading with invoices to "Bill to" address. All correspondence, invoices, bills of lading, shipping memos, packages, etc., must show purchase order number. If factory shipment, advise factory to comply.
7. **TRANSPORTATION CHARGES:** Invoices for prepaid transportation charges must be supported by original receipted expense bills.
8. **FOB POINT AND FREIGHT CHARGES:** Unless otherwise specified on this order, all items shall be delivered FOB Destination. No charge for delivery, drayage, express, parcel post, packing, cartage, insurance, license fees, permits, or for any other purpose will be paid by LRCCD unless expressly included and itemized in the order. Unless otherwise shown, on "FOB Shipping Point" transactions, CONTRACTOR shall arrange for lowest cost transportation, prepay and add freight to invoice and furnish supporting freight bills if the amount exceeds \$50.00. On "FOB Shipping Point" transactions, should any shipments under this purchase order be received by LRCCD in a damaged condition and any related freight loss and damage claims filed against the carrier or carriers be wholly or partially declined with the inference that damage was the result of the act of the shipper such as inadequate packaging or loading or some inherent defect in the equipment and/or material, CONTRACTOR on request of LRCCD shall at CONTRACTOR's own expense assist LRCCD in establishing carrier liability by supplying evidence that the equipment and/or materials was properly constructed, manufactured, packaged, and secured to withstand normal transportation conditions. Shipments that are California intrastate in nature and where freight is to be borne by LRCCD shall be tendered to carriers with written instructions that rate and charges may not exceed the lowest lawful rates on file with the California Public Utilities Commission.
9. **PATENT INDEMNITY:** The CONTRACTOR shall hold LRCCD, its officers, agents and employees harmless from alleged liability of any nature or kind, including costs and attorney fees and expenses, for infringement or use of any copyrighted or uncopyrighted composition, secret process, patented or unpatented invention, article or appliance furnished or used in connection with the contract or purchase order.
10. **TAXES:** Certain articles sold to LRCCD are exempt from certain Federal excise taxes. LRCCD will reimburse the CONTRACTOR for, or pay directly, all California State and local sales and use taxes applicable to this purchase.
11. **EQUAL OPPORTUNITY EMPLOYER:** The acceptance of this purchase order by a supplier of goods and services is a certification that such supplier complies with all provisions of executive order 11246 and is an equal opportunity employer.
12. **GENERAL SAFETY ORDERS:** All materials, supplies and services sold to LRCCD shall conform to the general safety orders of the State of California. All materials, except as otherwise specified, must be new and of the best quality of their respective kinds.
13. **INDEMNIFICATION:** CONTRACTOR shall indemnify, defend and hold harmless LRCCD, its trustees, officers, agents, employees and volunteers, from any and all claims, demands, suits, causes of action, damages, penalties, breaches of this agreement, infringement of patent rights, costs, expenses, violations of employee occupational health and safety laws, attorney fees, losses or liability, property damage, personal injuries to or death of persons, arising out of, alleged to have arisen out of, or relating in any way to CONTRACTOR's work to be performed under this agreement, except if caused solely by the negligence of LRCCD.
14. **TERMINATION:** LRCCD may terminate this agreement and be relieved of the payment of any consideration to CONTRACTOR should CONTRACTOR fail to perform the covenants herein contained at the time and in the manner herein provided. In the event of such termination LRCCD may proceed with the work in any manner deemed proper by LRCCD. The cost to LRCCD shall be deducted from any sum due the CONTRACTOR under this agreement and the balance if any, shall be paid the CONTRACTOR upon demand.
15. **ASSIGNMENT:** Without the written consent of LRCCD, this agreement is not assignable by CONTRACTOR either in whole or in part.
16. **PUBLIC WORKS PROJECTS:** CONTRACTOR must comply with Public Contract Code.
17. **CA LABOR CODE:** Pursuant to Section 1700, and following, the CONTRACTOR shall pay not less than the prevailing rate of per diem wages as determined by the Director of the California Department of Industrial Relations. Copies of such prevailing rate of per diem wages are on file at the Business Office of the Los Rios Community College District, 1919 Spanos Court, Sacramento, CA 95825. Those copies shall be made available to any interested party upon request. The CONTRACTOR shall forfeit, as penalty to the LRCCD, Fifty Dollars (\$50.00) for each calendar day or portion thereof, for each workman paid less than the stipulated prevailing rates for any work done under the contract by him/her or by any subcontractor under him, in violation of the provisions of such Labor Code.
18. **NOTICE:** Your employees may be exposed to hazardous substances during the course of their work while on LRCCD property. For additional information on the hazardous substances that your employees may be exposed to contact the LRCCD General Services Department at (916) 568-3048.
19. **INSURANCE:** CONTRACTOR shall, at all times, maintain in full force and effect the following insurance: Workers' Compensation, Commercial General Liability, Auto Liability, and Professional Liability if licensed professional. Policy limits for each shall be at least \$1,000,000 AND \$3,000,000 AGGREGATE for bodily injury, personal injury and property damage. Any combination of General Liability and Excess Coverage can be combined to meet the Aggregate. LRCCD shall be named as an additional insured on CONTRACTOR's policies. The CONTRACTOR shall provide a certificate of insurance and required endorsements to comply with this section at least 15 days prior to commencement of work under this contract. The certificate shall state that LRCCD will be given 30 days notice of any material change or cancellation in coverage.
20. **DISQUALIFIED EMPLOYEES:** CONTRACTOR shall ensure that persons who perform services on LRCCD property have not been convicted of any felony, or any controlled substance offense or any sex offense as those terms are defined by Education Code section 87008-87010. If LRCCD determines that any person employed by CONTRACTOR to work on LRCCD property is incompetent, unfaithful, intemperate, disorderly, abusive or is otherwise unsatisfactory, CONTRACTOR shall cause that employee to be removed from working on LRCCD property immediately, and that person shall not be employed again on LRCCD property.
21. **WORK AUTHORIZATION:** Prior to LRCCD's acceptance of this Agreement, CONTRACTORS who are not U.S. citizens must provide verification of (a) work authorization status from the appropriate U.S. Department of State; (b) a copy of their U.S. visa; (c) the number of days present in the U.S.; and (d) tax treaty status. LRCCD shall not make any payments to CONTRACTOR unless CONTRACTOR holds the appropriate U.S. visa. CONTRACTOR is responsible for ensuring they are in possession of the appropriate visa.
22. **WARRANTY:** CONTRACTOR expressly warrants that all materials, goods, equipment, services, and/or labor shall conform to the requirements set forth or incorporated into this order and any applicable industry standards or requirements, shall be merchantable and free from defects in workmanship, materials and/or design (including latent defects), and shall perform as specified. CONTRACTOR further warrants that all materials, goods, equipment, services, and/or labor will be fit and sufficient for the particular purposes intended by LRCCD. Unless agreed upon otherwise between LRCCD and CONTRACTOR, the warranty period shall be the longer of: (a) any express warranty included in this service agreement; (b) one year after the materials, goods, equipment, services, and/or labor are accepted by LRCCD; or (c) any warranty period provided under any applicable California law.

Requisition

Supplier MISCELLANEOUS

 ***** CA 95825
 United States

Ship To: RECEIVING
 10 COLLEGE PARKWAY
 FOLSOM CA 95630-6798

Business Unit: GENFD OPEN	
Req ID: 0001007687	Date: 02/05/2016
Page 1	
Requisition Name: VOLLEYBALLUSA	
Requester: Jeanne Plews	Bldg#: PE/H/A
Requester Signature	
Buyer: Suzanne Rouiller	
Approved:	

Line-Schd	Description	Quantity	UOM	Price	Extended Amt	Due Date
1-1	VELCRO NET TAPE ARTWORK-DIGITAL PRINT TOP TAPE ONLY SPECIFY 7"	1	EA	285.00	285.00	02/19/2016

ASSET DEPT: PE/H/A LOCATION: 04GYM CATEGORY: ATHL 1 PROFILE: EQP:ATHL

Total Requisition Amount: 285.00

VOLLEYBALLUSA.COM, UNITED VOLLEYBALL SUPPLY, LLC.
 14615 NE 91ST ST. BLDG. B
 REDMOND, WA 98052 PHONE 425-576-8835 FAX 425-827-2230

SHIPPING/HANDLING \$ 21.10 SALES TAX 24.48 TOTAL \$330.58

BU	Acct	Fd	Org	Prog	Sub	Proj	Amount
GENFD	6490	12	FL.VI.IEQP	08700	00000	548#F	285.00

2016 FEB 10 P 2:12
 F.I.C BUSINESS SERVICES

This is an initial purchase for the W Volleyball Program.

Purchases Charged to Catagorical Programs, Grants or Special Project.

This purchase is in compliance with the requirement of 548F

For grants/special projects State Instructional Equipment

Name: M Padrol

Approval Signature <i>Ann Maxwell</i>	Approval Signature <i>M Padrol</i>	Approval Signature
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Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Jesse Brown

2 Business name/disregarded entity name, if different from above
United Volleyball Supply LLC

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 C Corporation
 S Corporation
 Partnership
 Trust/estate
 Other (see instructions) ▶ _____
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
14615 NE 91st St. Bldg B

6 City, state, and ZIP code
Redmond WA 98052

7 List account number(s) here (optional)

Requester's name and address (optional)

Print or type
See Specific Instructions on page 2.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 20px; text-align: center;">-</td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 20px; text-align: center;">-</td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> <td style="width: 25px; height: 20px; border: 1px solid black;"></td> </tr> </table>					-				-			
				-				-				
or												
Employer identification number												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25px; height: 20px; border: 1px solid black;">2</td> <td style="width: 25px; height: 20px; border: 1px solid black;">0</td> <td style="width: 25px; height: 20px; border: 1px solid black;">-</td> <td style="width: 25px; height: 20px; border: 1px solid black;">2</td> <td style="width: 25px; height: 20px; border: 1px solid black;">1</td> <td style="width: 25px; height: 20px; border: 1px solid black;">8</td> <td style="width: 25px; height: 20px; border: 1px solid black;">6</td> <td style="width: 25px; height: 20px; border: 1px solid black;">8</td> <td style="width: 25px; height: 20px; border: 1px solid black;">9</td> <td style="width: 25px; height: 20px; border: 1px solid black;">0</td> </tr> </table>	2	0	-	2	1	8	6	8	9	0		
2	0	-	2	1	8	6	8	9	0			

Part II Certification

- Under penalties of perjury, I certify that:
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
 3. I am a U.S. citizen or other U.S. person (defined below); and
 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here	Signature of U.S. person ▶	Date ▶ 3/12/15
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
 - Form 1099-C (canceled debt)
 - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.
- If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.*
- By signing the filled-out form, you:
1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 2. Certify that you are not subject to backup withholding, or
 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.



LOS RIOS
COMMUNITY COLLEGE DISTRICT
 1919 Spanos Court ■ Sacramento, CA 95825
 PURCHASING DEPARTMENT (916) 568-3071
 Fax (916)568-3145 ■ lrccdpurchase@losrios.edu

VENDOR APPLICATION

Return signed completed form to Purchasing via fax or email.

NAME: _____

NAME OF FIRM United Volleyball Supply, LLC.	FEDERAL ID# OR SOCIAL SECURITY # 20 - 2186890 / - -
MAILING ADDRESS 14615 NE 91st St Bldg. B Redmond, WA 98052	REMIT ADDRESS 14615 NE 91st St Bldg. B Redmond, WA 98052

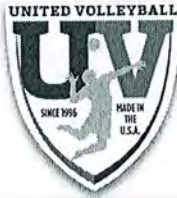
PHONE 425-576-8835	FAX 425-827-2230	EMAIL info@volleyballusa.com
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WEBSITE VolleyballUSA.com	ORGANIZATION CLASSIFICATION (Check all that apply) <input checked="" type="checkbox"/> Individual _____ MBE <input type="checkbox"/> Partnership _____ WBE <input type="checkbox"/> Non Profit _____ DVBE <input type="checkbox"/> Corporation (List State Incorporated) Contractor's License # _____											
AUTHORIZED COMPANY REPRESENTATIVES <table border="1"> <thead> <tr> <th>Name</th> <th>Title/Capacity</th> <th>Email</th> </tr> </thead> <tbody> <tr> <td>Micah Williams</td> <td>General Manager</td> <td>info@volleyballusa.com</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		Name	Title/Capacity	Email	Micah Williams	General Manager	info@volleyballusa.com					
Name	Title/Capacity	Email										
Micah Williams	General Manager	info@volleyballusa.com										

PROVIDE LIST OF COMMODITIES, EQUIPMENT, SUPPLIES and/or SERVICES AVAILABLE TO THE DISTRICT		
Volleyball Equipment		

VENDOR CERTIFICATION I certify that all statements contained herein are correct, understand that this information will be used as a basis for evaluating my request to receive bid invitations for purchases, understand that being placed on the qualified vendor bid list does not in any way represent an endorsement of my firm by Los Rios, nor does it relieve my firm of providing bonds and insurances as required. I further agree to disclose any known or potential conflicts of interest relating to my business and Los Rios, understand the requirements for fulfilling and invoicing orders, further certify this firm is an equal opportunity employer. _____ INITIALS	OTHER BUSINESS INFORMATION		
	Payment Terms Net 30	Discounts Extended	
Refund/Returns	Accts Payable	2/5/16	
_____ SIGNATURE	_____ TITLE	_____ DATE	

VOLLEYBALLUSA.COM
UNITED VOLLEYBALL SUPPLY, LLC



QUOTE

United Volleyball Supply, LLC.
14615 NE 91st St. Bldg. B
Redmond, WA 98052
PH: 425-576-8835
FX: 425-827-2230

DATE	QUOTE NO.
2/1/2016	30102

NAME / ADDRESS
Folsom Lake College Matt Torrez 10 College Pkwy, Folsom, CA torrezm@flc.losrios.edu

REP
CE

ITEM	DESCRIPTION	QTY	COST	TOTAL
Artwork-Digi...	Velcro Net Tape Artwork-Digital Print Top Tape Only Specify 7"	1	285.00	285.00T
Freight	Shipping and Handling Out-of-state sale, exempt from sales tax		21.10 0.00%	21.10T 0.00
		TAX	8%	24.48
				<u>\$ 330.58</u>
TOTAL				\$306.10

Celebrating 20 Years in the Volleyball Industry

LOW PRICE GUARANTEE: No one beats our pricing and quality! Some companies try, just let us know and we will explain the differences and save you money!

Comp Quote
p1 q2

sports imports
AT THE CENTER OF EVERY CHAMPIONSHIP
The Exclusive Partner of Senoh

PO Box 21040, Columbus, OH 43221 USA
800.556.3198 Toll Free
614-771-0246 Phone
614-771-0750 Fax
sportsimports.com | info@sportsimports.com



QUOTATION:

To: Matt Torrez,
Folsom Lake Community College,
10 College Parkway
Folsom, CA, 95630

Quote number: 16843
Sales Rep: Ashley Horstman
ahorstman@sportsimports.com
Date: 01/21/2016 03:36pm
Valid until: 09/01/2016

Part #	Product	Qty	Unit Price	Ext. Price
TNT	Custom Top Net Tape (requires additional lead time)	1	\$325.00	\$325.00

Subtotal: \$325.00
Tax: \$26.01
Shipping: \$29.25
Total: \$380.26

sports imports

AT THE CENTER OF EVERY CHAMPIONSHIP

*Camp Quote
P 2062*

CUSTOM TOP NET TAPE ORDER FORM

Standard Colors

- Black 
- Kelly Green 
- Red 
- Light Blue 
- Royal Blue 
- Gold 
- Navy Blue 
- Bright Blue 
- Forest Green 
- Teal 
- Yellow 
- Vegas Gold 
- Orange 
- Silver 
- Maroon 
- Burnt Orange 
- Purple 
- Cardinal Red 
- Gray 
- Sky Blue 

Contact Name: State:

School/ Organization Name:

Contact Email:

of Top Net Tape: Indoor Outdoor:
Outdoor net length: 28' 32'

Level 1: \$325 each (2 mock-ups included, \$50 per additional mock-up)

Standard or Custom Font color, Standard Fonts: **AACHEN, YEARBOOK, SPARKS** and, School Logo

Standard Font: Custom Font Name:

Standard Font Colors: Custom Font Color PMS:

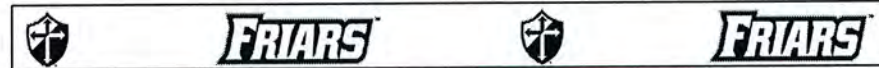
Standard Outline Colors: Custom Outline Color PMS:

WORDING:

Include a Logo- Must be send in high resolution vector format .ESP or .AI ONLY

Match the colors in my vector logo

Examples:



Training Top Net Tape: \$325 each

The Training Top Net Tape is a multi-colored vinyl tape that velcros to the top of any volleyball net for easy zone training. The colors offer 9 zones for identifying accuracy and consistency with setting, hitting and blocking.



Comments: