

# PROOF

IMMEDIATE RESPONSE REQUESTED.

S.O. #634667

YOUR PO #107554WIL

THE PURPOSE OF THIS PROOF IS ONLY TO SHOW LAYOUT, SPELLING AND SIZE  
THE FINISHED PRODUCT ITEM COLOR & IMPRINT COLOR MAY VARY  
ARTCHARGES WILL INCURRED IF THERE IS ANY CHANGES



ACTUAL SIZE-----

Hometown Home  
Health Services