

|             | <b>Custom Color Re- Mix Form</b> |                       | Date:                  |         |       |
|-------------|----------------------------------|-----------------------|------------------------|---------|-------|
| Customer:   |                                  | Phone: Quantity Sheen |                        |         |       |
| Mix #:      |                                  |                       |                        |         |       |
| Finish      |                                  |                       |                        |         |       |
| Note:       |                                  | <del>1</del> /2       |                        |         |       |
| ☐ Will Call | ☐ Call when Ready                | ☐ Delive              | ver Via:               |         |       |
|             |                                  |                       | REMOVED FROM INVENTORY |         |       |
|             |                                  |                       | QUARTS                 | GALLONS | FIVES |
|             |                                  |                       |                        |         |       |
|             |                                  |                       |                        |         |       |
|             |                                  |                       |                        | ~       | 1     |
|             |                                  |                       |                        |         | 34    |
|             |                                  |                       |                        |         |       |
|             |                                  |                       |                        |         |       |
|             |                                  |                       |                        |         | Tg.   |