



Shallotte Cleaners  
754-4435

Southport Cleaners  
457-1230

*"Your Certified Master Dry Cleaner"*

## Special Delivery Instructions

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Delivery Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ AM PM

Work Phone \_\_\_\_\_ AM PM

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Shirt Starch

None  Light  Medium  Heavy

Credit Card Information

Mastercard  Visa (choose one)

Cardholder Name \_\_\_\_\_

Card# \_\_\_\_\_

Expiration Date \_\_\_\_\_

I authorize Shallotte Cleaners to automatically charge my credit card.

Signature \_\_\_\_\_

\*PLEASE INDICATE THE BEST PLACE TO CHECK FOR PICK-UPS AND DELIVERIES\*

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\*IF APPLICABLE, INDICATE AN ALTERNATE DELIVERY LOCATION DUE TO INCLEMENT WEATHER\*  
(i.e. side door, screened in porch, etc)

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