

## Non-Surgical PPE Request

Order Request Date

Company Name

Company Address

Contact Person

Contact Person Phone

Contact Person Email

How many employees do you have?

**Please list the quantity of PPE you are requesting**

isolation masks

isolation gowns-one time use

isolation gowns-washable

face shields

**Please list the quantity of each do you plan on using per day**

isolation masks

isolation gowns-one time use

isolation gowns-washable

face shields

**All requests need to be emailed to the Reno County Health Dept to:**

**Tara Ghere, Reno County Health Department**

**Email: [tara.ghere@renogov.org](mailto:tara.ghere@renogov.org)**

**Phone: 620-259-2698**

**Disclaimer: Requests will be filled to the best of our ability with items available.**



Internal Use Only:

Pick Up Date

Pick Up Time