

Rhino Chokes & Gun Works Service Form 12480-B 44th St N Clearwater Fl 33762 800-226-3613 info@rhinochokes.com

Please complete and include with your firearm

| <u>Customer Information</u> | | |
|----------------------------------|--------------------------------|--|
| Name | | |
| Address | | |
| City | State | Zip |
| Phone | | |
| <u>Email</u> | | |
| Shotgun Information | | |
| Make | Model | |
| Gauge | Serial Numb | ber |
| Work Requested | | |
| Barrel Porting | Forcing Con | ne |
| Kickeez | Gracoil | |
| Custom Choke Tubes | Gun Cleanir | ng (full strip & Clean) |
| Other | | |
| | | |
| Please contact us for appointm | nent schedule. All work is don | e via appointment. |
| All barrels will be shipped insu | red at your expense upon con | <mark>npletion. If you would not like</mark> |
| your barrel shipped with insura | ance added please initial here | <u>.</u> |
| Signature | Dat | re |