

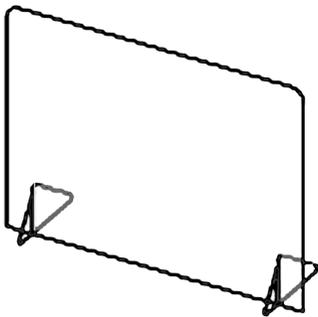
Personal Protection Privacy Screens

To improve staff safety ACI has created five types of screens in a variety of styles and sizes. Screens are made of .220 CLR industrial PVC PALRAM. Acrylic or Polycarbonate is available at additional cost and a longer lead time that will be calculated when order is placed (please specify with your order).

<https://aci.az.gov/product/personal-protection-privacy-screens>

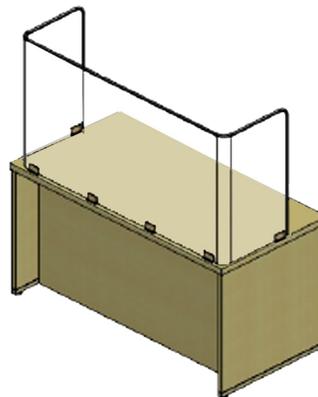
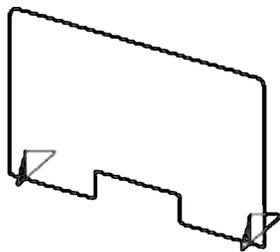


- ◆ Personal and Desk Top screens can include a pass thru at no extra charge (please specify with your order).
- ◆ Personal screens (sneeze guards) are \$15 per square foot and fully customizable up to 8 feet wide x 4 feet high
- ◆ If the size you want is not listed, pick the closest size and include the dimensions you require with your order and a cost will be calculated for you as your order is processed.

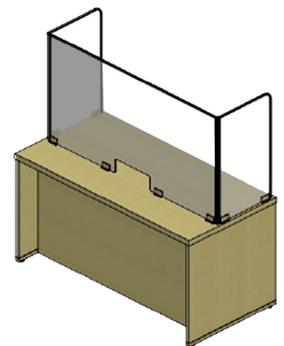


WS-BIOSHIELD-PERSONAL
with pass thru (optional)

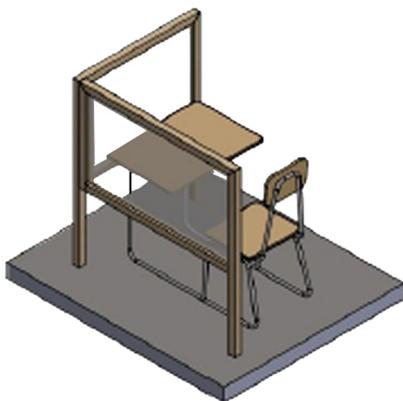
WS-BIOSHIELD-PERSONAL



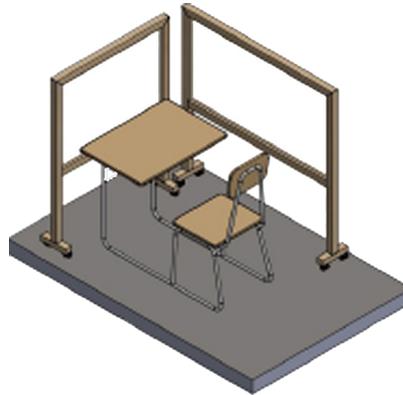
WS-BIOSHIELD-D3060
desk sold separately



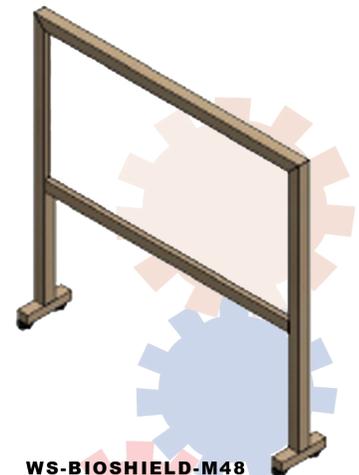
WS-BIOSHIELD-D3084
desk sold separately
with pass thru (optional)



WS-BIOSHIELD
desk sold separately



WS-BIOSHIELD-M36
&
WS-BIOSHIELD-M48
priced separately
desk sold separately



WS-BIOSHIELD-M48

- ◆ Three surface/desk top styles in various lengths up to 8 feet
- ◆ Two stand alone styles

- ◆ WS-BIOSHIELD-D3060 includes 6 Brass / Stainless Steel Standoff Desk Grips
- ◆ WS-BIOSHIELD-D3084 includes 8 Brass / Stainless Steel Standoff Desk Grips and Black PVC Edge Guard
- ◆ Stand alone screens include a poplar wood frame for stability



Quote Request

Name: _____ Date: _____ Purchase Order: _____
 Company: _____ Email: _____
 Street: _____ Phone Number: _____ Fax Number: _____
 City: _____ Zip Code: _____

| | |
|---|--|
| Bill to (Check here ___ if same as above.) Street: _____ City: _____ Zip Code: _____ | Name: _____ Email: _____ Phone Number: _____ Fax Number: _____ |
|---|--|

Ship to (Same as top address ___ Bill to ___ above.)
 Street: _____
 City: _____ Zip Code: _____
 Name: _____
 Email: _____
 Phone Number: _____ Fax Number: _____

| Item Code | Description | Size/Color | Line Price | Qty | Line Total |
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See attached Worksheet for order details.

By signing below, I am certifying that I am an authorized purchasing agent for the above named company.

Authorized Signature: _____

| | |
|----------------|--|
| Subtotal | |
| Sales Tax 8.6% | |
| Freight | |
| Total | |

Please sign completed Quote Request and email to sales@aci.az.gov