



Date _____ Sales Rep # _____ PO # _____

Customer _____ SmartID Customer _____

Department _____ Contact _____

Address _____

City _____

Phone _____ Fax _____

Item # _____ Qty _____ Price \$ _____

Description _____

Prestige _____ StarLite _____ True Lite _____ Cost Cruncher _____ Scatter Sentry _____

Frontal: _____ 0.5 mm _____ .35 mm Wrap: _____ .50mm _____ .35mm

Male _____ Female _____ Size _____ Buckle Closure _____ Velcro Closure _____

Outside Color # _____ Inside Color # _____

Monogram #69999 Up/Lower _____ ALL CAPS _____ *Script* _____ Price \$ _____

Velcro Name Tag \$ _____

Line 1 _____ Thread Color _____

Line 2 _____ Thread Color _____

Embroidery Design #69991 Price \$ _____ Location _____

Name _____ ID # _____

Thyroid Shield # _____ Qty _____ Price \$ _____

Prestige _____ StarLite _____ True Lite _____ Cost Cruncher _____ Scatter Sentry _____

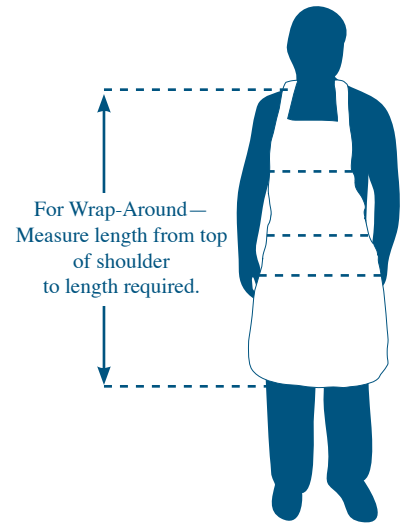
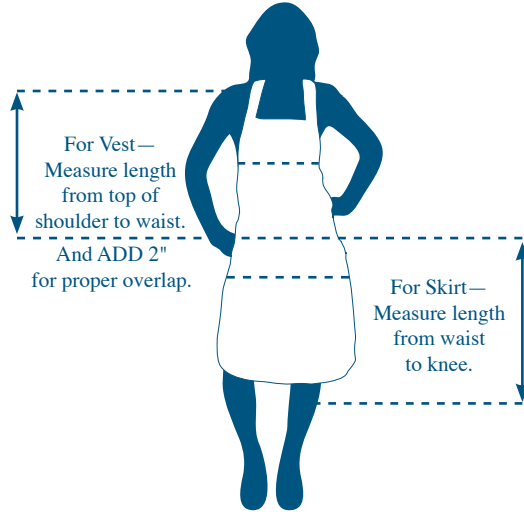
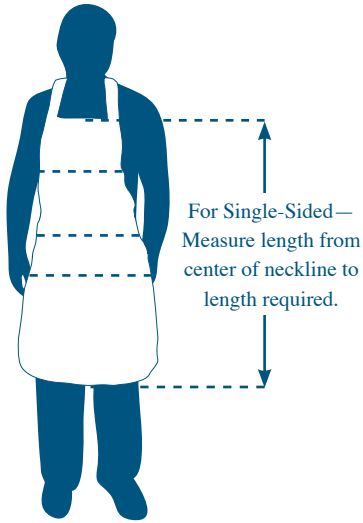
Outside Color # _____ Inside Color # _____ Velcro _____ Buckle _____

Monogram #69999 Up/Lower _____ ALL CAPS _____ *Script* _____ Price \$ _____

Line 1 _____ Thread Color _____

Line 2 _____ Thread Color _____

Name: _____



Chest: _____

Vest Length: _____

Waist: _____

Skirt Length: _____

Hips: _____

Apron Length: _____

Special Instructions:

Accessories:

PLEASE INCLUDE THIS FORM WITH YOUR PURCHASE ORDER

Bar-Ray Products
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