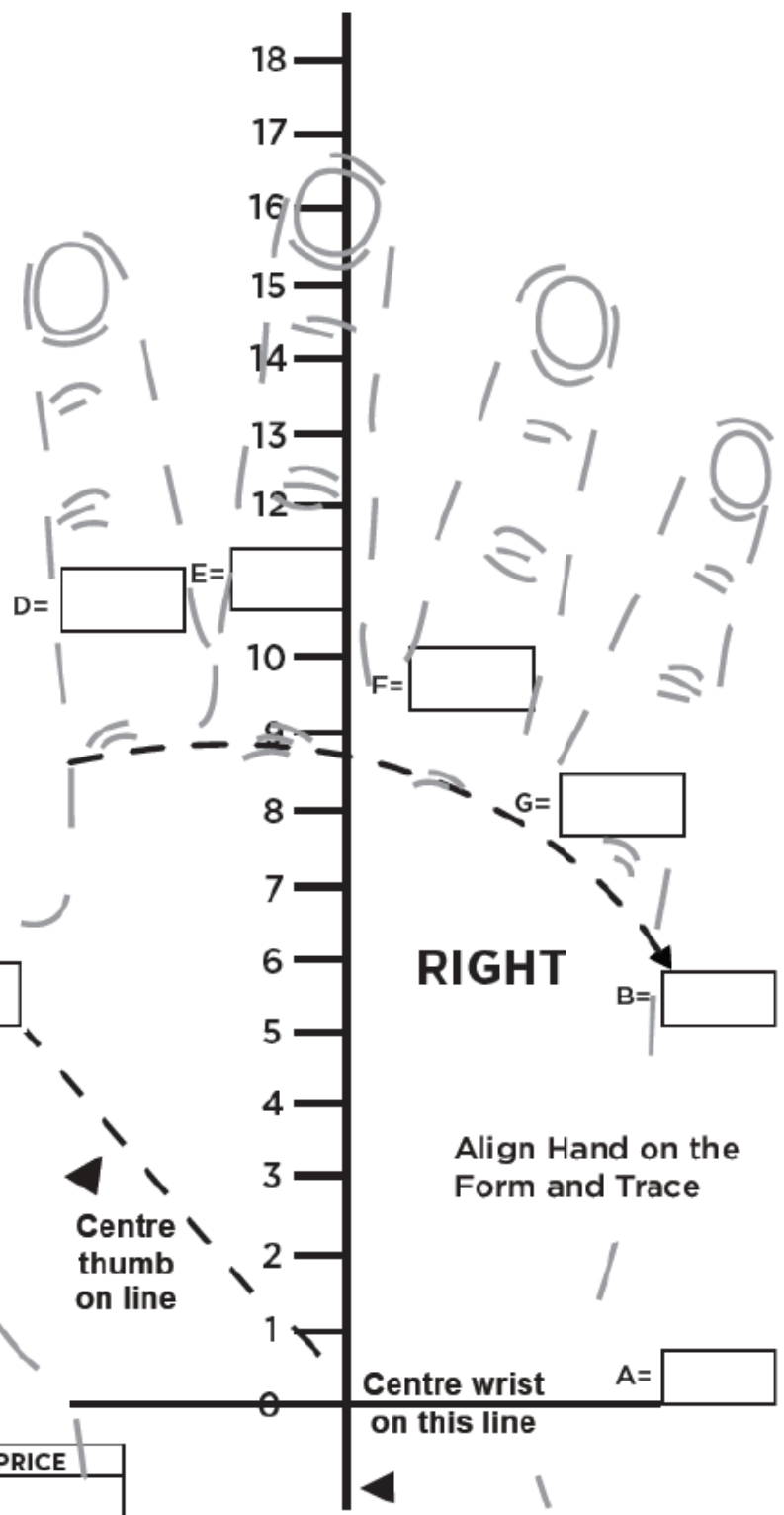


**Please Measure in Centimetres**

<b>SHIP TO:</b>	
Attn:	
Street:	
City:	
Province:	Postal Code:
Telephone:	
Fax:	
<b>BILL TO:</b>	
Attn:	
Street:	
City:	
Province:	Postal Code:
Telephone:	
Fax:	
<input type="checkbox"/> PO # _____	
<input type="checkbox"/> CC # _____ Exp. / _____	
If we have a question, whom should we contact?	
Contact Phone #:	
Client Name or Order Reference #: C= [ ]	
Age _____ Height _____ Weight _____	

For Internal Usage:

QTY	UNIT	PRICE
	Garment Code: UE -	
	Variable Compression Jacket	
<b>Circle Fabric Colour Choice(s) Below:</b>		
Tribute:	BLK PNK TEAL MRN BLU	
OJ :	BLK PNK TEAL MRN BLU	
TOTAL:		



**RIGHT**

Align Hand on the Form and Trace

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_