



TACTICAL SIZING FORM

DATE: _____ REQ. DELIVERY DATE: _____

PO#: _____ QUOTE#: _____

BILL-TO INFORMATION

NAME: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____ ZIP: _____
 PHONE: _____ FAX: _____
 EMAIL: _____

SHIP-TO INFORMATION (IF OTHER THAN BILL-TO)

DEPT / AGENCY: _____
 CONTACT: _____
 ADDRESS: _____
 CITY: _____
 STATE: _____ ZIP: _____
 PHONE: _____

MEASUREMENT INFORMATION

MEASURE OFFICER IN FULL UNIFORM AND DUTY BELT WITH CLOTH MEASURING TAPE. COMPLETE ALL FIELDS.

NAME: _____ HEIGHT: _____ ft. _____ in. WEIGHT: _____ lbs.

AGENCY: _____ BADGE #: _____ SIZED BY: _____

<p>(A) CHEST Torso circumference at widest point</p> <p>_____ in.</p>	<p>(B) WAIST Torso circumference at widest point</p> <p>_____ in.</p>	<p>(C) FRONT STANDING Length from clavicle notch to top of duty belt while standing</p> <p>_____ in.</p>	<p>(D) FRONT SEATED Length from clavicle notch to top of duty belt while seated</p> <p>_____ in.</p>	<p>(E) BACK STANDING Length from top vertebra to top of duty belt while standing</p> <p>_____ in.</p>
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VEST	OPTIONS	PANELS	PLATES
<input type="checkbox"/> ATLAS T3 <input type="checkbox"/> ATLAS T5 <input type="checkbox"/> ATLAS T7 <input type="checkbox"/> QUAD <input type="checkbox"/> INT'L SWAT	<input type="checkbox"/> Collar <input type="checkbox"/> Lower Back <input type="checkbox"/> Throat <input type="checkbox"/> Cumberbund <input type="checkbox"/> Biceps <input type="checkbox"/> Cumberbund Panels <input type="checkbox"/> Groin <input type="checkbox"/> 6x6" Side Pocket <input type="checkbox"/> QR <input type="checkbox"/> 6x8" Side Pocket	<input type="checkbox"/> ProX IIIA <input type="checkbox"/> LiteX IIIA <input type="checkbox"/> HeliX IIIA SIZE: <input type="checkbox"/> 5x8" <input type="checkbox"/> 6x8" <input type="checkbox"/> 7x9" <input type="checkbox"/> 8x10" <input type="checkbox"/> 10x12"	# Plates: <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 Existing Plates: <input type="checkbox"/> None <input type="checkbox"/> Thin <input type="checkbox"/> Thick Cut: <input type="checkbox"/> Full <input type="checkbox"/> Shooter's
COLOR	ID PATCHES	ID COLOR	PRODUCT NUMBER
<input type="checkbox"/> Black <input type="checkbox"/> Coyote <input type="checkbox"/> Ranger Green <input type="checkbox"/> MultiCam	<input type="checkbox"/> SHERIFF <input type="checkbox"/> POLICE <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> White <input type="checkbox"/> Gold <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> 306-1801 <input type="checkbox"/> 306-1807 <input type="checkbox"/> 406-1904 <input type="checkbox"/> 306-1802 <input type="checkbox"/> 306-1808 <input type="checkbox"/> 406-1904 <input type="checkbox"/> 306-1803 <input type="checkbox"/> 406-1901 <input type="checkbox"/> 406-1906 <input type="checkbox"/> 306-1805 <input type="checkbox"/> 406-1902 <input type="checkbox"/> 405-1907 <input type="checkbox"/> 306-1806 <input type="checkbox"/> 406-1903 <input type="checkbox"/> 405-1908