

CO. NAME _____ PHONE _____

JOB NAME _____ P.O. # _____

SHIP TO: _____

In Hands Date: _____

Pick Up

Ship

Visage Supplying Garments

New Order

Reorder

2-4 6-8 10-12 14-16

Quan.	Item and Color	S	M	L	XL	XX	XXX

Special Instructions:

Left Chest Above Pocket Full Front Small Center Chest
 On Pocket

Ink Colors & Image: _____

Full Back Tag under collar

Ink Colors & Image: _____

Left Sleeve Right Sleeve

Ink Colors & Image: _____

Left Leg Front Leg Right Leg Front Leg
 Side Leg Side Leg

Ink Colors & Image: _____