



# Concealable Armor Male Model Order Form

(Please Print & Fill In All Information Completely)

DATE \_\_\_\_\_

Purchaser: \_\_\_\_\_

Purchase Order # \_\_\_\_\_

CC: Visa  MasterCard  Discover  OR Payment Enclosed  Open Account

Credit Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Please State Uniform Trouser Size: Waist \_\_\_\_\_ Length \_\_\_\_\_

Ship to: \_\_\_\_\_ Attention: \_\_\_\_\_

Address (NO PO Boxes): \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

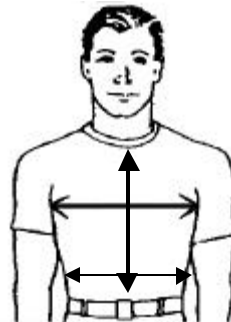
**SIZING PROCEDURE:** Measure in the following sequence, then enter your measurements on each line below.

1. Measure around the body at the fullest part of the chest. \_\_\_\_\_ INCHES

2. WHILE SEATED, measure from Gun Belt to the notch at the top of the sternum bone. \_\_\_\_\_ INCHES

PLEASE CHECK YOUR LENGTH TWICE

3. Measure completely around the body 2 inches above the waist. \_\_\_\_\_ INCHES



If a Sizing Sample Vest was Used for Measuring  
State Size & Length  
\_\_\_\_\_

Coverage (Check One)	Threat Level (Check One)	Armor Series (Check One)	Softouch & VMAX <sup>®</sup> Added Value Options (Check One)	Colors (Check Color(s) Desired)	TRANSPOR <sup>®</sup> T-SHIRTS (Choose a Style Color & Size)
Extended (Full) Coverage <input type="checkbox"/>	IIA <input type="checkbox"/>	VMAX <sup>®</sup> <input type="checkbox"/>	Standard Pkg <input type="checkbox"/> Includes Tee shirt & Trauma pad	Black <input type="checkbox"/>	Crew Neck <input type="checkbox"/> V-Neck <input type="checkbox"/>
		Softouch <input type="checkbox"/>			
Contour (Partial) Coverage <input type="checkbox"/>	II <input type="checkbox"/>	T <sup>4</sup> Aramid <input type="checkbox"/>	Value Pkg <input type="checkbox"/> Includes 2 <sup>nd</sup> Carrier	Dark Brown <input type="checkbox"/>	White <input type="checkbox"/> Black <input type="checkbox"/>
		T <sup>4</sup> Options			
	IIIA <input type="checkbox"/>	Add 2 <sup>nd</sup> Carrier <input type="checkbox"/>	Value Plus Pkg <input type="checkbox"/> Includes 2 <sup>nd</sup> Carrier, 2 <sup>nd</sup> Tee Shirt & Carry Bag	Light Blue <input type="checkbox"/>	Tee Shirt Size
		T <sup>4</sup> Add Trauma Pad <input type="checkbox"/>			
		T <sup>4</sup> Add TRANSPOR <sup>®</sup> to T <sup>4</sup> Carrier(s) <input type="checkbox"/>			

Special Notes : \_\_\_\_\_

Reliance Armor cannot accept RETURNS, EXCHANGES, or give FREE ALTERATIONS after 30 days from delivery.

Fax Order s to 586.493.9396 - You will receive an order and delivery confirmation within two business days