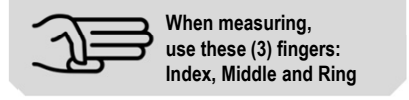




MALE CONCEALABLE BODY ARMOR SIZING FORM

Date: _____ Name: _____ Agency: _____
 Sales Rep: _____ Distributor: _____ Person Measuring: _____
 Address: _____ City: _____ State: _____ Zip: _____

SIZING PROCEDURE FOR USING TAPE MEASURE: Measure and determine the size in the sequences shown below, then enter measurements in the provided spaces below. For best results, take all measurements while the officer is wearing his regular duty uniform and belt. **ROUND DOWN TO THE NEAREST INCH (MEASUREMENTS 1-5)**



CHEST/BUST & ABS	CHEST HEIGHT	BACK HEIGHT	SEATED MEASUREMENT
<p>1 CHEST/BUST INCHES 2 ABDOMEN INCHES</p>	<p>3 CHEST HEIGHT INCHES</p> <p>TIP: Place Index Finger Here</p>	<p>4 BACK HEIGHT INCHES</p>	<p>5 SEATED INCHES</p> <p>TIP: Place Index Finger Here</p>
<p>CHEST/BUST: Measure around the largest girth of the chest. ABDOMEN: Measure around the torso at three (3) fingers below the Sternal Notch.</p>	<p>CHEST HEIGHT: Measure from three (3) fingers below Clavicle Notch to three (3) fingers above gun belt.</p>	<p>BACK HEIGHT: Measure three (3) fingers from C7 (bottom of shirt collar) to three (3) fingers above gun belt.</p>	<p>SEATED: Verify the Chest Height does not conflict with duty belt equipment in seated position and maintains three (3) fingers below Clavicle Notch.</p>

SIZING FORM INFORMATION:

Vest Model: _____ Color: _____

Male TruFit | Tails No Tails

Accessories: _____

Height: _____ Weight: _____

Duty Belt On: Yes No Duty Pants On: Yes No

Side Coverage: 1" Overlap 2" Overlap

* Liner Panels: 1/4 Spacer Mesh 1/8 Spacer Mesh

* Trauma Insert: Soft SPEED Blade

* Thorshield: Yes No

* Liner Panels, Trauma Inserts and Thorshield are an additional cost.

Deviations Requested by Officer: _____

Officer Signature: _____

Badge #: _____

Additional Notes: _____

ADDITIONAL MEASUREMENT TIPS:

- Measuring tape should be snug but not tight, allowing the person being measured to breathe freely.
- Do not add additional length to any measurement to account for overlap amounts.
- Measurements should be taken in a relaxed position, without arms raised.
- Measurement locations are the intended fit and coverage of Point Blank Enterprises.
- Alternative coverage or measurements are at the discretion of the customer and may affect warranty coverage regarding alterations and/or recommended NIJ and/or industry coverage recommendations. See SIZING FORM INFORMATION section below for notes and required signature.

ENTER POINT BLANK SIZING VEST INFORMATION (CHECK):

Point Blank Sizing Vest Used: Yes No

Front Size: _____

Front Length: S3 S2 S1 R L1 L2
 L3 L4 L5

Front Width: R W1

Back Size: _____

Back Length: S3 S2 S1 R L1 L2
 L3 L4 L5

Back Width: R W1