

2022 CPH Order Submission Form

Account: _____

Job Name: _____

PO Number _____

Customer Name _____

In Hand Date _____

Company Name _____

Pickup Date / Ship Date _____

Mailing Address _____

Manager _____

Mailing Address _____

Contact Email _____

Additional Notes

Part A		Part B		Part C	
Garment Type:		Garment Type:		Garment Type:	
Design Name:		Design Name:		Design Name:	
(F/B/S):		(F/B/S):		(F/B/S):	
Quantity:		Quantity:		Quantity:	
Garment Color:		Garment Color:		Garment Color:	
YS:		YS:		YS:	
YM:		YM:		YM:	
YL:		YL:		YL:	
XL/XS:		XL/XS:		XL/XS:	
SM:		SM:		SM:	
MD:		MD:		MD:	
LG:		LG:		LG:	
XL:		XL:		XL:	
2XL:		2XL:		2XL:	
3XL:		3XL:		3XL:	
4XL:		4XL:		4XL:	
Total Qty:	0	Total Qty:	0	Total Qty:	0
Front Imprint Colors:		Front Imprint Colors:		Front Imprint Colors:	
Back Imprint Colors:		Back Imprint Colors:		Back Imprint Colors:	
Left / Right Sleeve Colors:		Left / Right Sleeve Colors:		Left / Right Sleeve Colors:	
Cost/Garment		Cost/Garment		Cost/Garment	
Part A Total Cost		Part B Total Cost		Part C Total Cost	
Production Notes		Production Notes		Production Notes	