



GM CAMI Assembly - Non-Standard Sizing Uniform Order Form

1500 No

Employee Name _____
 Employee ID _____
 Name Embroidered _____
 ERT Crests Required _____

Date _____
 3 Digit Cost Centre _____
 Department Name _____
 Team Leader Name _____

Note: "Tall-Cut" shirts are 2" longer in the body & sleeves than "Regular-Cut" shirts.
 Note: Delivery Time is 6 to 8 weeks.

Shirts	Colour	Description	Cut	Quantity	Size	E Paid	C Paid
P2463R	White	100% Cotton Covered Dome Shirt, Long Sleeve (3XL-5XL)	Reg.				
P2463T	White	100% Cotton Covered Dome Shirt, Long Sleeve (3XL-5XL)	Tall				
2410	Navy	100% Cotton T-Shirt, Long Sleeve (2XL-3XL)	Reg.				
2300	Navy	100% Cotton T-Shirt, Short Sleeve (2XL-3XL)	Reg.				
88181WHT	White	100% Polyester Polo Shirt, Short Sleeve (2XL - 5XL) (NO POCKETS) MEN	Reg.				
88181NVY	Navy	100% Polyester Polo Shirt, Short Sleeve (2XL - 5XL) (NO POCKETS) MEN	Reg.				
85016WHT	White	60/40 Poly/Cotton Polo Shirt, Short Sleeve (2XL-5XL)	Reg.				
85016NVY	Navy	60/40 Poly/Cotton Polo Shirt, Short Sleeve (2XL-5XL)	Reg.				
P2363R	White	65/35 Poly/Cotton Covered Dome Shirt, Long Sleeve (3XL-5XL)	Reg.				
P2363T	White	65/35 Poly/Cotton Covered Dome Shirt, Long Sleeve (3XL-5XL)	Tall				
P2313R	White	65/35 Poly/Cotton Covered Dome Shirt, Short Sleeve (3XL-5XL)	Reg.				
P2313T	White	65/35 Poly/Cotton Covered Dome Shirt, Short Sleeve (3XL-5XL)	Tall				
2410	Orange	100% Cotton ORANGE T-Shirt, Long Sleeve (2XL-3XL) UNISEX	Reg.				
2300	Orange	100% Cotton ORANGE T-Shirt, Short Sleeve (2XL-3XL) UNISEX	Reg.				
78181WHT	White	Ladies 100% Polyester Polo Shirt, Short Sleeve (2XL-3XL) (TAPERED - NO POCKETS)	Reg.				
78181NVY	Navy	Ladies 100% Polyester Polo Shirt, Short Sleeve (2XL-3XL) (TAPERED - NO POCKETS)	Reg.				
75027WHT	White	Ladies 60/40 Poly/Cotton Polo Shirt, Short Sleeve (2XL-3XL) (TAPERED - NO POCKETS)	Reg.				
75027NVY	Navy	Ladies 60/40 Poly/Cotton Polo Shirt, Short Sleeve (2XL-3XL) (TAPERED - NO POCKETS)	Reg.				

Shorts & Pants	Colour	Description	Cut	Quantity	Waist	Inseam	E Paid	C Paid
Note: Only even numbers accepted for pant inseam and waist size.								
PT34	Navy	Men's 60/40 Cotton/Poly Short (44-50 waist)	N/A			10"		
PT22	Navy	Men's Low Rise 65/35 Poly/Cotton Pant (44-46 waist)	N/A					
P2459	Navy	Men's 65/35 Poly/Cotton Pant (44-54 waist)	N/A					
P3010	Navy	Men's 100% Cotton Pant (44-54 waist)	N/A					
PC76	Navy	Men's 100% Cotton Cargo Pant "ERT ONLY" (44-50 waist)	N/A					
P4990	Navy	Ladies 65/35 Poly/Cotton Pant (44-52 waist)	N/A					
P4996	Navy	Ladies Low Rise 65/35 Poly/Cotton Pant (44-52 waist)	N/A					
P4970	Navy	Ladies 100% Cotton Pant (44-52 waist)	N/A					
PT27	Navy	Ladies 60/40 Cotton/Poly Short (24-28 waist)	N/A			8"		
L8510	Black	Leather Belt (44-54 waist)	N/A					

Outerwear	Colour	Description	Cut	Quantity	Size	E Paid	C Paid
VT22	Navy	65/35 Poly/Cotton Convoy Vest (2XL-3XL) "E Paid"	Reg.				
221446	Navy	100% Polyester 1/4 Zip Polar Fleece (2XL-5XL) "E Paid"	Reg.				

"E Paid" are Employee paid items with departmental exceptions. Employee signature required. Submit Employee paid orders directly to CDN Linen Rep. CREDIT CARD REQUIRED FOR ALL "EP" PURCHASES. MEASUREMENTS NEED TO BE COMPLETED BY A CANADIAN LINEN REP.

Reason for Replacement _____

Date _____

Employee Signature: I authorize CAMI Assembly to deduct Employee paid garments.

Departmental Approval _____

All mandatory and optional items and exception uniform items must be worn as per original design and issue. No modifications to CAMI uniform design is permitted

Employee Signature: I have chosen and accept responsibility for the above sizes.



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P2459	Navy	Men's 65/35 Poly/Cotton Pant (44-54 waist)	N/A					
P3010	Navy	Men's 100% Cotton Pant (44-54 waist)	N/A					
PC76	Navy	Men's 100% Cotton Cargo Pant "ERT ONLY" (44-50 waist)	N/A					
P4990	Navy	Ladies 65/35 Poly/Cotton Pant (44-52 waist)	N/A					
P4996	Navy	Ladies Low Rise 65/35 Poly/Cotton Pant (44-52 waist)	N/A					
P4970	Navy	Ladies 100% Cotton Pant (44-52 waist)	N/A					
PT27	Navy	Ladies 60/40 Cotton/Poly Short (24-28 waist)	N/A			8"		
L8510	Black	Leather Belt (44-54 waist)	N/A					

Outerwear	Colour	Description	Cut	Quantity	Size	E Paid	C Paid
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Reason for Replacement _____	Date _____	Employee Signature: I authorize CAMI Assembly to deduct Employee paid garments. _____
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