



	<u>Order Qty</u>	<u>Price</u>	<u>Extended Cost</u>
AB89 Armband	_____	10.00	_____
AB90 Armband	_____	10.00	_____
AB91 Armband	_____	10.00	_____
AB92 Armband	_____	10.00	_____
IP6 Sport Belt	_____	11.00	_____
IP7 Sport Belt	_____	11.00	_____
SP1 Sport Belt	_____	11.00	_____
MB1 Wireless Mic Belt	_____	9.50	_____
MB3 Vertical Mic Belt	_____	10.50	_____
TM-101 (40/box)	_____	5.50	_____
ED-500 (40/box)	_____	5.95	_____
SE35 White (50/box)	_____	4.75	_____
KE5W (36/box)	_____	4.50	_____
SE54 (24/box)	_____	5.50	_____
SBTE20 (10/box)	_____	14.95	_____
Subtotal	_____	_____	_____
Shipping	_____	_____	_____
Total	_____	_____	_____

Armband Fit Guide

Device	No Case	Thin/Shell	Med Case	Large Case
iPhone 6/6s/7/8	AB90	AB90	AB91	AB89
Galaxy S10e	AB90	AB90	AB91	AB89
iPhone Xs/X	AB90	AB90	AB91	AB89
iPhone 11 Pro	AB90	AB90	AB91	AB89
Galaxy S8/S9	AB90	AB90	AB91	AB89
Galaxy S10/Note 10	AB91	AB91	AB91	AB92
iPhone Xr/Xs Max	AB91	AB91	AB92	AB92
iPhone 11/11 Pro Max	AB91	AB91	AB92	AB92
Galaxy S8+/S9+/S10+	AB91	AB91	AB92	AB92
iPhone 6/6s/7/8 Plus	AB91	AB91	AB92	AB92
Note 8/9/10+/10+5G	AB91	AB92	AB92	AB92

Sport Belt Fit Guide

Device	No Case	Thin/Shell	Med Case	Large Case
iPhone 6/6s/7/8	SP1 / IP7	SP1 / IP7	SP1 / IP7	SP1 / IP7
Galaxy S10e	SP1 / IP7	SP1 / IP7	SP1 / IP7	SP1 / IP7
iPhone Xs/X	SP1 / IP7	SP1 / IP7	SP1 / IP7	SP1 / IP7
iPhone 11 Pro	SP1 / IP7	SP1 / IP7	SP1 / IP7	SP1 / IP7
Galaxy S8/S9	SP1 / IP7	SP1 / IP7	SP1 / IP7	SP1 / IP6
Galaxy S10/Note 10	SP1 / IP7	SP1 / IP7	SP1 / IP7	SP1 / IP6
iPhone Xr/11	SP1 / IP7	SP1 / IP7	SP1 / IP6	SP1 / IP6
iPhone Xs Max/11 Pro Max	SP1 / IP6	SP1 / IP6	SP1 / IP6	SP1 / IP6
Galaxy S8+/S9+/S10+	SP1 / IP6	SP1 / IP6	SP1 / IP6	SP1 / IP6
iPhone 6/6s/7/8 Plus	SP1 / IP6	SP1 / IP6	SP1 / IP6	SP1 / IP6
Note 8/9/10+/10+5G	SP1 / IP6	SP1 / IP6	SP1 / IP6	SP1 / IP6

Terms:

1. **Established accounts Net 30.** New accounts: COD, MC/Visa/Discover/American Express or prior credit approval.
2. Min. order qty for belts / armbands is 12 units (mix and match); headphones shipped in full cases as specified above.
3. FOB Cincinnati.

Bill To: (Credit card payments – list name/address on cc)

Ship To:

Authorized Signature _____ PO# _____

Telephone Number _____ Date _____

Credit Card Number _____ CVV # _____ Expir. Date _____