



33 EAST MAIN STREET
CHAMPAIGN IL 61820

Phone (217) 352-7666
FAX (217) 352-7669

TUXEDO MEASUREMENTS FORM

Please supply measurements below for each person.

Today's Date: ____ / ____ / ____

Event Date: ____ / ____ / ____

NAME OF GROOM IN WEDDING PARTY (if applicable) _____

NAME _____ HEIGHT _____ WEIGHT _____

NECK _____ SLEEVE _____ WAIST _____ OUTSEAM _____

CHEST: OVERARM _____ UNDERARM _____

JACKET SIZE _____ circle one: *SHORT* *REG* *LONG* *XLONG*

INSLEEVE MEASUREMENT _____

SHOE SIZE _____ circle one: *MED* *WIDE*

NAME OF PERSON TAKING MEASUREMENTS _____

NAME OF BUSINESS _____

BUSINESS LOCATION _____

PHONE NUMBER (please include area code) _____

Please FAX this information to: Jos. Kuhn & Co.

FAX# (217) 352-7669