



AUTHORIZATION FORM

To: Strathcona County **OPS Support**

Please bring this form with your uniform item(s) to any **STITCH IT** location in Alberta.

(search *Stitch It Web Site* for a location nearest you: www.stitchit.com)

Dear Stitch It Employee:

We are authorizing the following repair(s) for our employee's uniform

Employee name: _____ PO: ____SC114018____

Service Description: Alterations

Check Box	PANTS	QTY	Approval		Check Box	SHIRTS	QTY	Approval
	Basic Hem					Shorten Hem		
	Replace Zipper					Shorten Sleeves		
	Repair Seams(s) Crotch and Side					Taper Sides		
	Repair Pockets					Repair Seams		
						Sew on Flashes		
						Repair Buttons		

Other Description / Approvals: _____

Signature: _____

Stitch It Associates Scan this code
for correct charge account.

Locations: West Edmonton Mall – Southgate Mall – Emerald Hills in Sherwood Park

STRATHCONA COUNTY - OPS Support



10000035