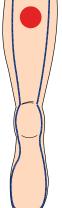
## 39325 Sock **Order Form**



| Patient information   |                 |              |                  | Purchase information |             |                |              |
|---|-----------------|--------------|------------------|----------------------|-------------|----------------|--------------|
| Patient ID  |                 |              |                  | Company name         |             |                |              |
| When ordering, please enter the previous order number.  |                 |              |                  | Clinician_           |             |                |              |
|   |                 |              |                  | ZipCity              |             |                |              |
| Has patient used Elements Body before? □Yes   |                 |              |                  | Delivery address     |             |                |              |
| Requested Delivery Date  By submitting this form you are certifying that personal data has been processed in compliance with GDPR (EU) 2016/679. The data will be processed only to the extent necessary to deliver ordered products.  Due to the Data Privacy Regulation GDPR (EU) 2016/679) this form must be submitted through https://submit.allardsupport.com. |                 |              |                  |                      |             |                |              |
| Sock style  |                 |              | ltem.            | no.                  | Quantity    | <i>'</i>       |              |
| □Sock below knee  |                 |              | 39325 0000       |                      |             |                |              |
| This product is only available with anterior zipper and closed toes.  |                 |              |                  |                      |             |                |              |
| Velcro Stop for zipper  |                 |              | □Yes             | □No                  | □No         |                |              |
| Anti-slip on upper edge   |                 |              | □Yes             | es 🗆 No              |             |                |              |
| Anti-Slip under the sole of the foot  |                 |              | □Yes             | Yes 🗆 No             |             |                |              |
| Colour Options  | (For children u | nder the age | of 3, only beige | fabric and b         | eige reinfo | rcements can b | e offered)   |
| Fabric  | □Beige          | □Black       | □Purple          | e □F                 | ink         | □Blue          | □Red         |
| Reinforcement   | □Beige          | □Black       | □Space           |                      | Coral       | □Djungle       | □Comic Blue  |
| Thread  | □Beige          | □Black       | □Purple          | e □F                 | ink         | □Blue          | □Red         |
|   | □Hot pink       | □Light blu   | ue □Greer        | n 🗆 🗆 🗅 C            | Orange      |                |              |
| Transfers: Choose Transfers: □Yes   | □No             |              | atest transfer   | options list a       | available)  | and enter the  | etter below. |
| Record Transfer Letter on calf  |                 |              |                  |                      |             |                |              |







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