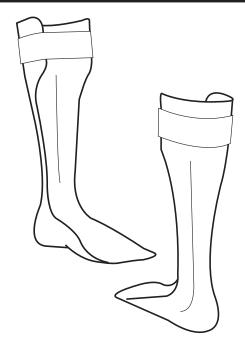
AFO ORDER FORM



Facility Name / Account #		Cor	ntact:	Order Taken by:
Due Date:				
Ship to Address:				City:
State: Zip Code:	Phone:	Fax:	Email:	,



Reference# Long Foot (Right or Left)	Reference# Short Foot (Right or Left)	Sizes	Women's Shoe Size	Men's Shoe Size	Calf Circumference	Height
B2LRS B2LLS	B2SRS B2SLS	Small	5 1/2 - 7	4 1/2 - 6	10" - 11"	12 1/2"
B2LRM B2LLM	B2SRM B2SLM	Medium	7 - 8 1/2	6 1/2 - 8	10" - 11"	14"
B2LRL B2LLL	B2SRL B2SLL	Large	8 1/2 - 10	8 1/2 - 10	12 1/2" - 13"	14 1/2"
B2LRX B2LLX	B2SRX B2SLX	X-Large	10 - 11 1/2	10 1/2 - 12	15 1/2" - 17"	16

LONG FOO	T: SIZE	ТҮРЕ
SSS	M L XL M L XL M M L XL M M L XL M M L XL M M M L XL M M M M	Right Left Right Left Right Left Right Left Right Left Left Right Left Right Left Left Right Left Right Left Right Left Right Left Right Left Right Right Left Right Rig
SHORT FOO	DT:	ТҮРЕ

FAX THIS FORM TO (877) 288-4197 OR CALL (888) 982-8181 WWW.OPTECCORP.COM EMAIL: OPTECCORP.@AOL.COM

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