

# PRODUCT ORDER

## COMFORT FOOT DOUBLE



**RMS Limited**  
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 Kent ME10 3BF  
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### CONTACT DETAILS

Client Name:
Contact Name:
Telephone Number:
Wheelchair Service Address:

### DATE

### P.O. NUM

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## COMFORT FOOT DOUBLE

### STYLE PLEASE TICK PART NUM.

Standard		FTD
Tall		FTDT

### LEG SEPARATOR PLEASE TICK PART NUM.

Leg Separator		(default no extra code)
Without Leg Separator		NS

### GEL PLEASE TICK PART NUM.

No Gel		(default no extra code)
Gel		G

### WHEELCHAIR SIZE

Please tick	16	18	20	22	24

### OFFICIAL USE

Sample Comfort Foot Double product code:  
**FTDNSG-20** Sample product code explained:  
**FTD** = Comfort Foot Double Product Code, **NS** = without Leg Separator, **G**= Gel, **20** = Wheelchair Size

1. Please insert Leg Separator Part Number if required:

2. Please insert Gel Part Number if required:

3. Please insert Wheelchair Size

Your Comfort Foot Double Product Code, please insert using above information:

FTD \_ \_ \_ - \_ \_  
 FTD NSG - 20

## COMFORT FOOT DOUBLE TOP PORTION ONLY

### STYLE PLEASE TICK PART NUM.

Standard		FTD
Tall		FTDT

### LEG SEPARATOR PLEASE TICK PART NUM.

Leg Separator		(default no extra code)
Without Leg Separator		NS

### WHEELCHAIR SIZE

Please tick	16	18	20	22	24

### OFFICIAL USE

Sample Comfort Foot Double product code:  
**FTDTNS-20-TOP**  
 Sample product code explained:  
**FTDT** = Comfort Foot Double Product Code,  
**NS** = without Leg Separator,  
**20** = Wheelchair Size,  
**TOP** = Comfort Foot Double Product Code

1. Please insert Leg Separator Part Number if required:

2. Please insert Wheelchair Size:

Your Comfort Foot Double Top Portion Foot Support Only Product Code as chosen left:

FTDT \_ \_ \_ - \_ \_ -TOP  
 FTDT NS - 20-TOP

## COMFORT FOOT DOUBLE FOOT SUPPORT ONLY

### GEL PLEASE TICK PART NUM.

No Gel		(default no extra code)
Gel		G

### WHEELCHAIR SIZE

Please tick	16	18	20	22	24

### OFFICIAL USE

Sample Comfort Foot Double Foot Support product code:  
**FTDG-20-BTM** Sample product code explained:  
**FTD** = Comfort Foot Double Product Code, **G**= Gel, **20** = Wheelchair Size, **BTM** = Foot Support Only Part Number

1. Please insert Gel Part Number if required:

2. Please insert Wheelchair Size:

Your Comfort Foot Double Foot Support Only Product Code as chosen above:

FTD\_ \_ \_ - \_ \_ -BTM  
 FTDG- 2 0-BTM