



# Sock Order Form

Customer # : \_\_\_\_\_ Ship Code: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Address1: \_\_\_\_\_  
 Address2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date: \_\_\_\_\_  
 Ordered By: \_\_\_\_\_  
 Total Pairs Ordered: \_\_\_\_\_

Patient Name(If Applicable): \_\_\_\_\_  
 PO#(If Applicable): \_\_\_\_\_

Please indicate the number of pairs you wish to order in each style, color, and size

## Men Socks

	Black	White	Navy	Ecru		Black	White	Navy	Ecru
<b>Crew Socks</b>					<b>Ankle Socks</b>				
S 6.5-8	_____	_____	_____	_____	S 6.5-8	_____	_____	_____	_____
M 8.5-10	_____	_____	_____	_____	M 8.5-10	_____	_____	_____	_____
L 10.5-12	_____	_____	_____	_____	L 10.5-12	_____	_____	_____	_____
XL 12.5-15	_____	_____	_____	_____	XL 12.5-15	_____	_____	_____	_____
<b>Extra Roomy (Edema) Socks</b>					<b>Over Calf Socks</b>				
	Black	White				Black	White		
S 5-8	_____	_____			S 6.5-8	_____	_____		
M 8.5-11.5	_____	_____			M 8.5-10	_____	_____		
L 12-15	_____	_____			L 10.5-12	_____	_____		
					XL 12.5-15	_____	_____		

## Women Socks

	Black	White	Navy	Ecru		Black	White	Navy	Ecru
<b>Crew Socks</b>					<b>Ankle Socks</b>				
S 5-7	_____	_____	_____	_____	S 5-7	_____	_____	_____	_____
M 7.5-9	_____	_____	_____	_____	M 7.5-9	_____	_____	_____	_____
L 9.5-11	_____	_____	_____	_____	L 9.5-11	_____	_____	_____	_____
XL 11.5-13	_____	_____	_____	_____	XL 11.5-13	_____	_____	_____	_____
<b>Extra Roomy (Edema) Socks</b>					<b>Merry Jane Socks</b>				
	Black	White				Black	White	Ecru	
S 6-9	_____	_____			S 5-7	_____	_____	_____	_____
M 9.5-12.5	_____	_____			M 7.5-9.5	_____	_____	_____	_____
L 13+	_____	_____			L 10-13	_____	_____	_____	_____
					<b>Over Calf Socks</b>				
						Black	White		
					S 5-7	_____	_____		
					M 7.5-9	_____	_____		
					L 9.5-11	_____	_____		
					XL 11.5-13	_____	_____		

\*\*\*Please Fax Orders to: 262-242-9300\*\*\*