



Drew Order Form

Account Name: _____ Account #: _____ Date: _____
 Phone Number: _____ Fax Number: _____

For full line of Drew products please see our website at www.comfortfitlabs.com

| Women's Styles | Men's Styles |
|---|--|
| <u>Bloom II</u> – (Velcro) Black Calf, Black Nubuck, Bone Calf, Navy Calf, Town Brown Nubuck, Taupe Nubuck N(AA) 6-21, M(B) 5-12, W(D) 5-12, WW (EE) 5-12 | <u>Navigator II</u> * – (Velcro) Black, Clay, Brown All colors Leather M(B) 8-12,13,14 W(EE) 7-12,13,14 4W(4E) 7-12,13 |
| <u>Delite</u> – (Velcro) Black Calf, White Calf, Sky Blue Nubuck, Pink Nubuck, Bone Nubuck, Grey Nubuck, Silver Calf, Black Calf All shoes are either calf or Nubuck with mesh sides N(AA) 6-11 M(B) 5-11 W(D) 5-11,12 WW (EE) 5-11,12 | <u>Thunder</u> – Lace (Velcro is Thunder V) White/Silver, Black/Black All colors Leather N(B) 9-13,14 M(D) 7-13,14 W(EE) 7-13,14 4W (EE) 7-13,14 6E 7-13,14 |
| <u>Blitz</u> - Lace (Velcro is Blitz V) White/Silver, White/Blue, Black/Black, White/Red All colors Leather N (AA) 7-12, M (B) 5-12, W (D) 5-12, WW (EE) 5-12, XW (4E) 5-12 | <u>Arlington</u> * – (Lace) Black Smooth Leather, Antique Brown Leather N(B) 9-14, M(D) 8-14, W (EE) 8-14, 4W (4E) 7-14, 6E 7-14 |
| <u>Parade II</u> – (Lace) Black, White, Bone, Taupe N(AA) 6012, M(B) 5012, W(D) 5-12, WW (EE) 5-12 All colors Leather | <u>Walker II</u> * – (Lace) Black or Brown Pebbled Leather N(B) 9-14, M(D) 8-14, W(EE) 8-14, 4W (4E) 8-14 |
| <u>Flash</u> – Lace (Velcro is Flash V) White/Blue, White/Grey, White/Pink, Black/Grey, White/White N(AA) 7-12, M(B) 5-12, W(D) 5012, WW(EE) 5-12, XW (4E) 5-12 All colors Leather with mesh accents | <u>Lightening</u> – Lace (Velcro is Lightening V) Black or White N(B) 9-13,14 M(D) 7-13,14 W (EE) 7-13,14 4W (4E) 7-13,14, 6E 7-13,14 |

Patient Name: _____ Male Female

Style Name/Item #: _____ Color: _____

Size: _____ Length: _____ Width: _____

*we will accept orders for styles shown on website and not listed on this sheet – put item number in above space

Drew Shoe Only

Package for Medicare Therapeutic Shoe Bill with one pair of Drew shoes and 3 pairs of multi-density, heat molded diabetic inserts

Package for Medicare Therapeutic Shoe Bill with one pair of Drew shoes and 3 pairs of custom diabetic orthotics

Shipping applies to all orders
 (Check your selections from above and total) Total: _____

ComfortFit Orthotic Labs
 246 Columbus Avenue
 Roselle, NJ 07203

888.523.1600
908.259.9105 fax

Any returns must be received in our lab within 2 weeks of your receipt for credit. Please note that shoes/insoles cannot be worn and the box must be intact with no writing on it. A \$6.00 restocking fee will be charged for each return.