PAPFAR order form

PLEASE FILL OUT:

Company:

Phone:

City:

Date:

	A	**Socks**	15/16	17/19	20/22	23/26	27/30	31/34	35/39	39/41		
	B	**Tights**	56/62	68/74	80/86	1/2Y	3/4Y	5/6Y	7/8Y	9/10Y		
	C	**Indoor shoes**	0/6M	6/12M	12/18M	18/24M	24/36M	36/48M				
	D	**Baby helmets**	45	47	49	51	53	55				
	E	**Hats**	S	M	L							
	F	**Fullfaces/helmets**	60	70	80	90	100					
	G	**Baby clothing**	60	70	80	90	100					
	H	**Baby clothing**	3M	6M	9M	12M	18M	2Y	3Y			
	I	**Kids clothing**	2Y	3Y	4Y	5Y	6Y	7Y	8Y	10Y	12Y	

	STYLE	COL.											
Ex.:	*1535383*	*040*	*G*	*Wool body*	*3*	*3*	*3*	*3*	*3*				

THANK YOU FOR YOUR ORDER.

All orders taken are subject to changes in the rates of exchange of the curriences used, strikes, lockouts or other force majeure events.

MELTON A/S
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