



| | | | |
|------------|-------------|---------------|--------------|
| Last names | First names | Date of order | Order number |
|------------|-------------|---------------|--------------|


MODEL


Pants



Stockings

WAIST


Normal waist

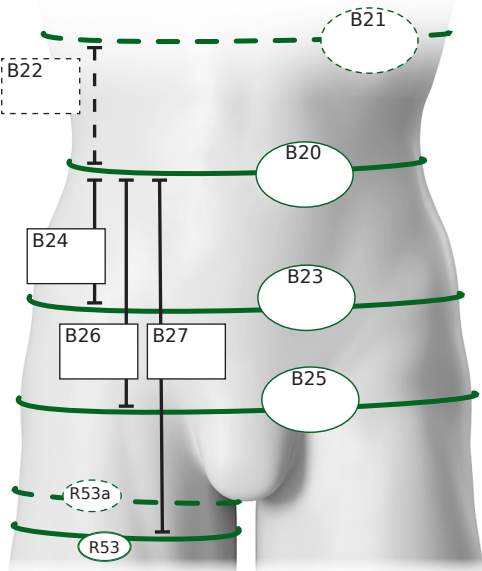
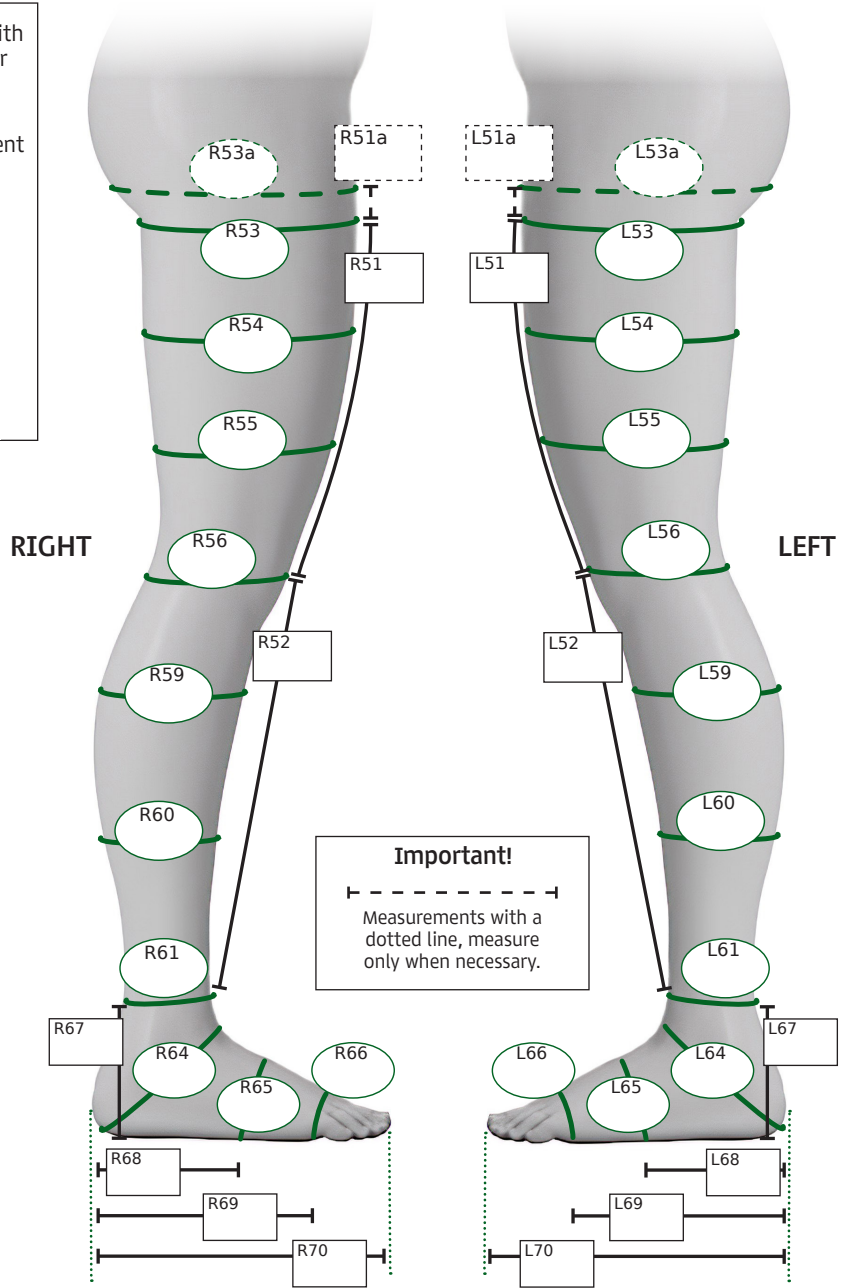
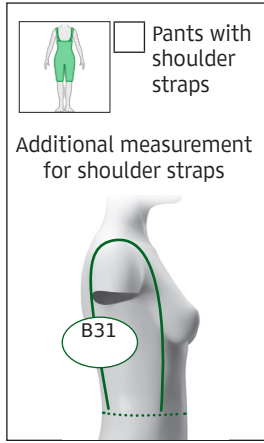

High waist

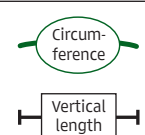
TOES IN STOCKINGS


Closed


Open

Other
(fill also form 13)



| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|----------|--------------------------|----------|--------------------------|---------|--------------------------|---------|--------------------------|--------|--------------------------|----------|--|--------------------------|----------|--------------------------|----------|--------------------------|----------|--------------------------|---------|--------------------------|---------|--------------------------|--------|--------------------------|----------|---|--------------------------|---------|--------------------------|-----------------|--------------------------|------------|--------------------------|------------|--------------------------|-----------------|--------------------------|------------|---|--------------------------|--------|--------------------------|--------|--------------------------|--------|--------------------------|----------|--------------------------|---------|--------------------------|---------------|--------------------------|--------------|--------------------------|---------|--------------------------|---------|--------------------------|------------|--------------------------|-------------|--------------------------|------------|--------------------------|-----------|--------------------------|------------|---|
| SKIN | COMPRESSION | SENSE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Normal pressure level <input type="checkbox"/> Strong fabric <input type="checkbox"/> Medium fabric Lightened pressure level <input type="checkbox"/> Strong fabric <input type="checkbox"/> Medium fabric | CCL 1 <input type="checkbox"/> Strong fabric <input type="checkbox"/> Medium fabric CCL 2 <input type="checkbox"/> Strong fabric <input type="checkbox"/> Medium fabric CCL 3 <input type="checkbox"/> Strong fabric <input type="checkbox"/> Medium fabric CCL 4 <input type="checkbox"/> Strong fabric other: <input type="checkbox"/> Material: | Light pressure <input type="checkbox"/> Medium fabric <input type="checkbox"/> Light fabric <input type="checkbox"/> Strong fabric Medium pressure <input type="checkbox"/> Medium fabric <input type="checkbox"/> Strong fabric Strong pressure <input type="checkbox"/> Strong fabric <input type="checkbox"/> Medium fabric | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fabric/pressure information: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fabric color <table border="0"> <tr><td><input type="checkbox"/></td><td>F1 Beige</td></tr> <tr><td><input type="checkbox"/></td><td>F2 Black</td></tr> <tr><td><input type="checkbox"/></td><td>F3 White</td></tr> <tr><td><input type="checkbox"/></td><td>F4 Grey</td></tr> <tr><td><input type="checkbox"/></td><td>F5 Blue</td></tr> <tr><td><input type="checkbox"/></td><td>F6 Red</td></tr> <tr><td><input type="checkbox"/></td><td>F7 Green</td></tr> </table> | <input type="checkbox"/> | F1 Beige | <input type="checkbox"/> | F2 Black | <input type="checkbox"/> | F3 White | <input type="checkbox"/> | F4 Grey | <input type="checkbox"/> | F5 Blue | <input type="checkbox"/> | F6 Red | <input type="checkbox"/> | F7 Green | Seam color <table border="0"> <tr><td><input type="checkbox"/></td><td>S1 Beige</td></tr> <tr><td><input type="checkbox"/></td><td>S2 Black</td></tr> <tr><td><input type="checkbox"/></td><td>S3 White</td></tr> <tr><td><input type="checkbox"/></td><td>S4 Grey</td></tr> <tr><td><input type="checkbox"/></td><td>S5 Blue</td></tr> <tr><td><input type="checkbox"/></td><td>S6 Red</td></tr> <tr><td><input type="checkbox"/></td><td>S7 Green</td></tr> </table> | <input type="checkbox"/> | S1 Beige | <input type="checkbox"/> | S2 Black | <input type="checkbox"/> | S3 White | <input type="checkbox"/> | S4 Grey | <input type="checkbox"/> | S5 Blue | <input type="checkbox"/> | S6 Red | <input type="checkbox"/> | S7 Green | Emblem <table border="0"> <tr><td><input type="checkbox"/></td><td>S8 Pink</td></tr> <tr><td><input type="checkbox"/></td><td>S9 Bright Green</td></tr> <tr><td><input type="checkbox"/></td><td>S10 Yellow</td></tr> <tr><td><input type="checkbox"/></td><td>S11 Orange</td></tr> <tr><td><input type="checkbox"/></td><td>S12 Bright blue</td></tr> <tr><td><input type="checkbox"/></td><td>S13 Purple</td></tr> </table> | <input type="checkbox"/> | S8 Pink | <input type="checkbox"/> | S9 Bright Green | <input type="checkbox"/> | S10 Yellow | <input type="checkbox"/> | S11 Orange | <input type="checkbox"/> | S12 Bright blue | <input type="checkbox"/> | S13 Purple | Fastener* <table border="0"> <tr><td><input type="checkbox"/></td><td>P1 Cat</td></tr> <tr><td><input type="checkbox"/></td><td>P2 Dog</td></tr> <tr><td><input type="checkbox"/></td><td>P3 Fox</td></tr> <tr><td><input type="checkbox"/></td><td>P4 Bunny</td></tr> <tr><td><input type="checkbox"/></td><td>P5 Duck</td></tr> <tr><td><input type="checkbox"/></td><td>P6 Strawberry</td></tr> <tr><td><input type="checkbox"/></td><td>P7 Snowflake</td></tr> <tr><td><input type="checkbox"/></td><td>P8 Dino</td></tr> <tr><td><input type="checkbox"/></td><td>P9 Bear</td></tr> <tr><td><input type="checkbox"/></td><td>P10 Beetle</td></tr> <tr><td><input type="checkbox"/></td><td>P11 Ladybug</td></tr> <tr><td><input type="checkbox"/></td><td>P12 Turtle</td></tr> <tr><td><input type="checkbox"/></td><td>P13 Whale</td></tr> <tr><td><input type="checkbox"/></td><td>P14 Flower</td></tr> </table> | <input type="checkbox"/> | P1 Cat | <input type="checkbox"/> | P2 Dog | <input type="checkbox"/> | P3 Fox | <input type="checkbox"/> | P4 Bunny | <input type="checkbox"/> | P5 Duck | <input type="checkbox"/> | P6 Strawberry | <input type="checkbox"/> | P7 Snowflake | <input type="checkbox"/> | P8 Dino | <input type="checkbox"/> | P9 Bear | <input type="checkbox"/> | P10 Beetle | <input type="checkbox"/> | P11 Ladybug | <input type="checkbox"/> | P12 Turtle | <input type="checkbox"/> | P13 Whale | <input type="checkbox"/> | P14 Flower | Genital area <input type="checkbox"/> Closed <input type="checkbox"/> Open <input type="checkbox"/> Fly AZ Zipper <input type="checkbox"/> AH Hooks <input type="checkbox"/> AZF Guard Diaper <input type="checkbox"/> Yes |
| <input type="checkbox"/> | F1 Beige | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F2 Black | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F3 White | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F4 Grey | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F5 Blue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F6 Red | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | F7 Green | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S1 Beige | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S2 Black | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S3 White | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S4 Grey | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S5 Blue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S6 Red | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S7 Green | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S8 Pink | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S9 Bright Green | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S10 Yellow | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S11 Orange | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S12 Bright blue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | S13 Purple | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P1 Cat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P2 Dog | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P3 Fox | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P4 Bunny | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P5 Duck | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P6 Strawberry | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P7 Snowflake | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P8 Dino | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P9 Bear | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P10 Beetle | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P11 Ladybug | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P12 Turtle | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P13 Whale | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | P14 Flower | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Color and material details: _____ Silicone and elastane band preferences: _____ Addition details: _____ | | | <p>*where and what kind, write in "Addition details"</p>  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Our production chooses the placement of the emblem.