



## Customer Acknowledgement Form

### Invacare Birdie lifter Series D-clip

| Models Involved    |                                |
|--------------------|--------------------------------|
| Item Number        | Item Name                      |
| 3000503.E3B00-0125 | LIFTER BIRDIE (180KG-EL-JC)    |
| 3000502.E3B00-0125 | LIFTER BIRDIE 170KG EL         |
| 3000513.D3B02-0125 | LIFTER BIRDIE CMPT (150-ML-JC) |
| 3000512.D3B02-0125 | LIFTER BIRDIE COMPACT 150KG ML |
| 3000503D3B02-0125  | LIFTER BIRDIE MAN(170KG-ML-JC) |

**Customer:**

**Date: 05/10/2016**

Please complete the table below with "Yes" or "No" responses.

| Item # | Serial # | Device Checked as Compliant | Device Corrected. (If Required) |
|--------|----------|-----------------------------|---------------------------------|
|        |          | (Response required)         | (Response required)             |
|        |          | (Response required)         | (Response required)             |
|        |          | (Response required)         | (Response required)             |
|        |          | (Response required)         | (Response required)             |
|        |          | (Response required)         | (Response required)             |
|        |          | (Response required)         | (Response required)             |

This is to confirm that the necessary corrective action, as documented in the Recall for Product Correction, dated xx.xx.2016, is now under way and to be done for the devices detailed above.

Please send the Customer Response form back to [recalls@invacare.com.au](mailto:recalls@invacare.com.au)

### **Action Completed**

Name .....

Title .....

Signed.....

Company.....

Contact No.....

Date.....

**Please initiate correction within one month, to be completed within three months.**

**INVACARE AUSTRALIA PTY LTD**

ABN 45 074 676 270