SUNRISE MEDICAL

CE

EC DECLARATION OF CONFORMITY
EU Konformitätserklärung

Company: *Die Firma*	Sunrise Medical GmbH Kahlbachring 2-4 D-69254 Malsch
Product: *Produkt* **(May include accessories)** *(Kann Zubehör beinhalten)*	**Quickie Krypton F**

We, Sunrise Medical declare under our sole responsibility that the product(s) to which this declaration relates, is a class 1 device, and is in conformity with the requirements of EC Council Directive for Medical Devices 93/42/EEC.

This was verified with conformity evaluation procedures according to Medical Device Directive Annex VII.

Michael Kutzer *Director R&D, PDM, Europe*	A	03.04.2017
Approval Name and Function *Name und Funktion*	**Revision** *Revision*	**Approval Date** *Genehmigungsdatum*
Signature (Sunrise Medical Approval representative) *Unterschrift*		