

RELAX Personal Fit Back - Seating



INFORMATION

Customer Name: _____
 Address: _____ PO #: _____
 City: _____ Phone #: _____ Date: _____
 Account #: _____ Authorizer Name: _____



STANDARD SIZES

<input type="checkbox"/> PFB16	Personal Fit Back 16" X 18"	\$642
<input type="checkbox"/> PFB18	Personal Fit Back 18" X 18"	\$642

COVER OPTIONS

<input type="checkbox"/> PFBCOV1	Standard	N/C
<input type="checkbox"/> PFBCOV2	TEK4 Infection Control Complete Cover	N/C
<input type="checkbox"/> PFBCOV7	TEK4 Infection Control 4" Bottom Protector	N/C

CUSTOM WIDTH

<input type="checkbox"/> PFBCW	Personal Fit Back Custom Width	\$824
Height:	<input checked="" type="checkbox"/> 18"	
Width:	_____	

EXTRA COVER

<input type="checkbox"/> PFBCOV3	Standard Cover	\$119
<input type="checkbox"/> PFBCOV4	TEK4 Infection Control Complete Cover	\$119
<input type="checkbox"/> PFBCOV8	TEK4 Infection Control 4" Bottom Protector	N/C
<input type="checkbox"/> PFBCOV5	Custom Cover <input type="checkbox"/> Standard <input type="checkbox"/> TEK4	\$161
<input type="checkbox"/> PFBCOVW	Width: _____	
<input type="checkbox"/> PFBCOVH	Height: _____	

*Note: Please enter the size above for standard or custom cover

CUSTOM HEIGHT

<input type="checkbox"/> PFBCH	Personal Fit Back Custom Height	\$824
Height:	_____	
Width:	<input type="checkbox"/> 16" <input type="checkbox"/> 18"	

CUSTOM SIZES

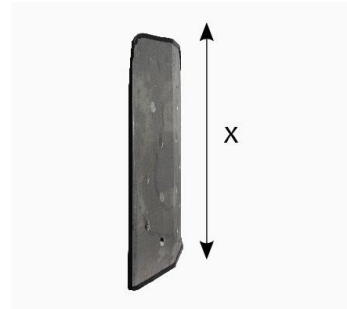
<input type="checkbox"/> PFBC	Personal Fit Back Custom	\$1,007
Height:	_____	
Width:	_____	

ADDITIONAL OVERLAYS

<input type="checkbox"/> PFBOLV1	Visco Overlay Half (3 Pieces)	\$418
<input type="checkbox"/> PFBOLV2	Visco Overlay Full (6 pieces)	\$835
<input type="checkbox"/> PFBOLG1	Gel Overlay Half (3 Pieces)	\$418
<input type="checkbox"/> PFBOLG2	Gel Overlay Full (6 Pieces)	\$835

PIN OPTIONS

<input type="checkbox"/> PFBP1	1" Long Pins	\$48
(Standard) <input type="checkbox"/> PFBP34	3/4" Long Pins	N/C



NO LATERAL
 X = Standard shell height 18"