

## Account Information

Date Account Number

Bill To

Phone Number Fax Number

Email Address Buyer

P.O. Number Patient Name

## Ship To

Name

Address

City State/Zip Code

Phone Number

Please complete this form and return to Permobil by email OR click the button to send PDF.

**Order      Quote Only**

### Notes:

# Tru-Shape™

*Client Assessment Equipment*

*Order Form & Price List*

Effective Date 05/01/2019

1. Client Assessment Equipment Package*	Part #	MSRP
Fitting chair base (anthracite) <i>(Including digitizing frame)</i> Manual vacuum pump AF Plastic Fill bag-18" back AF Plastic Fill bag-18" seat Base System Complete <i>(Base System includes all components listed in section I.)</i> * Scanner sold separately	472Q29=10000 448A33 432B1=44-5-AF 438B1=44-5-AF	\$2,856 \$45 \$601 \$601 \$4,103
2. Client Assessment Equipment, Accessories and Replacement Parts	Part #	MSRP
<p><b>MOLDING BAGS*</b></p> AF Plastic Fill bag-14" back AF Plastic Fill bag-14" seat AF Plastic Fill bag-18" back AF Plastic Fill bag-18" seat *NOTE: - 14" Molding bags may be used for clients requiring a seating width between 10" to 14" - 18" Molding bags may be used for clients requiring a seating width between 15" to 20" - For clients requiring a seating width greater than 20", please contact your Permobil Seating and Positioning Representative for additional options <p><b>- FITTING CHAIR/SIMULATOR PARTS FOR OBSS FITTING CHAIRS</b></p> Armrests (pair) Split elevating legrest Single panel legrest Frame for fitting chair Seat frame (legrest mount) Lower leg frame (legrest mount) Knee joint Seat clamp Leg clamp Heel edge Footrest rim <p><b>REFLECTIONS MOLDING BAGS</b></p> Reflection Simulator Latex-Free Molding Bags	432B1=34-5-AF 438B1=34-5-AF 432B1=44-5-AF 438B1=44-5-AF  HR33308100 475B34=PK008 475B34=SK029 448A19 473C29=SV004 473B29=SE003 475B34=SK014 475B34=ST042 475B34=ST041 475B34=SK039 475B34=SZ033  PSBNL	\$526 \$526 \$601 \$601  \$166 \$328 \$62 \$320 \$41 \$29 \$78 \$102 \$21 \$34 \$97  \$150