

ORDER CUSTOM-MADE SEATS AND BACK RESTS

Tried out by _____ Tel _____ Date _____

Tried out for/markning _____ Purchasers order number _____

Mark type of detail. Use all three angles when illustrating how to customize the detail.
Submit measurement in cm.

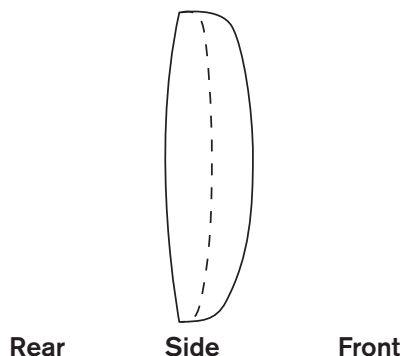
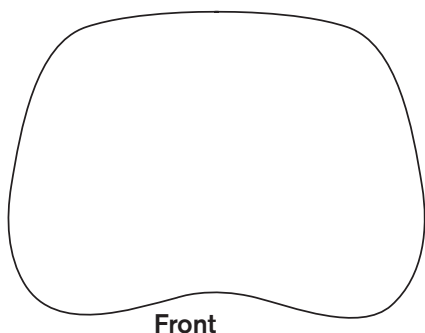
Back rest

ErgoMedic ErgoMedic PLUS

Slow Recovery Twin

Width _____ x Height _____

Upholstery/code.....



Artnr. leave to Mercado

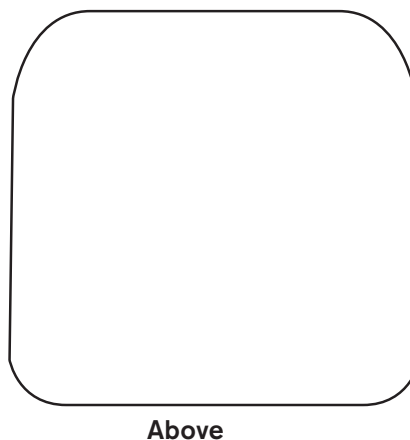
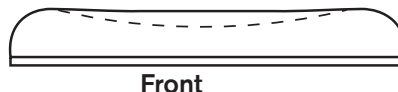
Seat

ErgoMedic ErgoMedic PLUS Twin

Slow Recovery Coxit

Width _____ x Depth _____

Upholstery/code.....



Artnr. leave to Mercado

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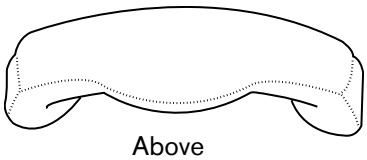
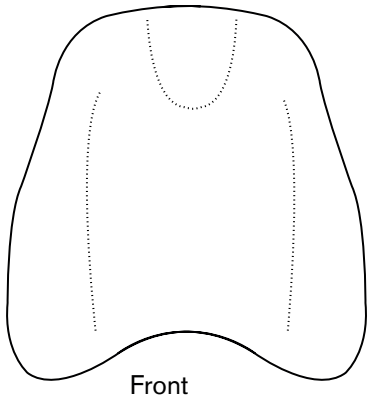
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Back rest

- ErgoMedic ErgoMedic PLUS
 Slow Recovery Twin

Width x Height

Upholstery/code.....



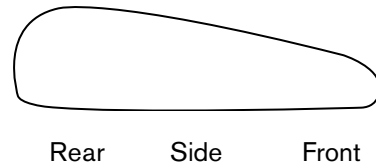
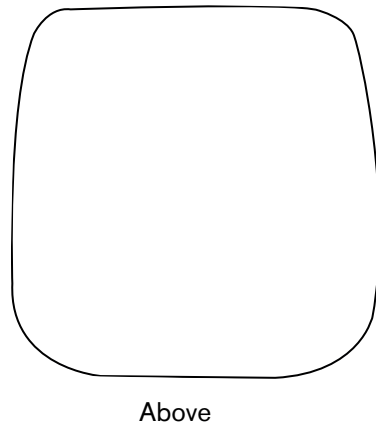
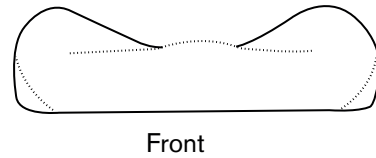
Rear Side Front

Seat

- ErgoMedic ErgoMedic PLUS Twin
 Slow Recovery Coxit

Width x Depth

Upholstery/code.....



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