



# FUTURE MOBILITY HEALTHCARE INC.

DIVISION OF ABF MFG GROUP INC.  
WWW.FUTUREMOBILITY.CA



## PRISM Adjustable Tension Back

TEL: 905-671-1661  
FAX: 905-671-3377

orderdesk@futuremobility.ca

### Account Information

Account #: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Ship to Address: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Tag For: \_\_\_\_\_

Order Date: \_\_\_\_\_  
P.O.# \_\_\_\_\_  
Phone: \_\_\_\_\_  
City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### ADJUSTABLE TENSION BACK

#### Adjustable Tension Back Low (range 13"-17"high)

<input type="checkbox"/> 14"wide x 13"high	TB1413	\$165	_____
<input type="checkbox"/> 15"wide x 13"high	TB1513	\$165	_____
<input type="checkbox"/> 16"wide x 13"high	TB1613	\$165	_____
<input type="checkbox"/> 17"wide x 13"high	TB1713	\$165	_____
<input type="checkbox"/> 18"wide x 13"high	TB1813	\$165	_____
<input type="checkbox"/> 19"wide x 13"high	TB1913	\$165	_____
<input type="checkbox"/> 20"wide x 13"high	TB2013	\$165	_____

#### Adjustable Tension Back High (range 16"-20"high)

<input type="checkbox"/> 14"wide x 16"high	TB1416	\$175	_____
<input type="checkbox"/> 15"wide x 16"high	TB1516	\$175	_____
<input type="checkbox"/> 16"wide x 16"high	TB1616	\$175	_____
<input type="checkbox"/> 17"wide x 16"high	TB1716	\$175	_____
<input type="checkbox"/> 18"wide x 16"high	TB1816	\$175	_____
<input type="checkbox"/> 19"wide x 16"high	TB1916	\$175	_____
<input type="checkbox"/> 20"wide x 16"high	TB2016	\$175	_____

#### Custom Sizes

<input type="checkbox"/> Custom Size	TBCUS	\$225	_____
--------------------------------------	-------	-------	-------

Width: \_\_\_\_\_  
Height: \_\_\_\_\_

#### NOTES:

Empty area for notes.