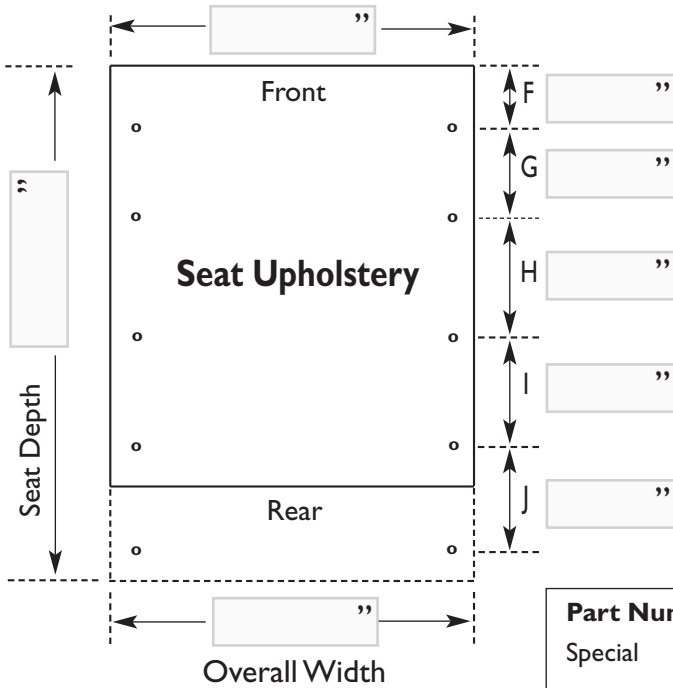
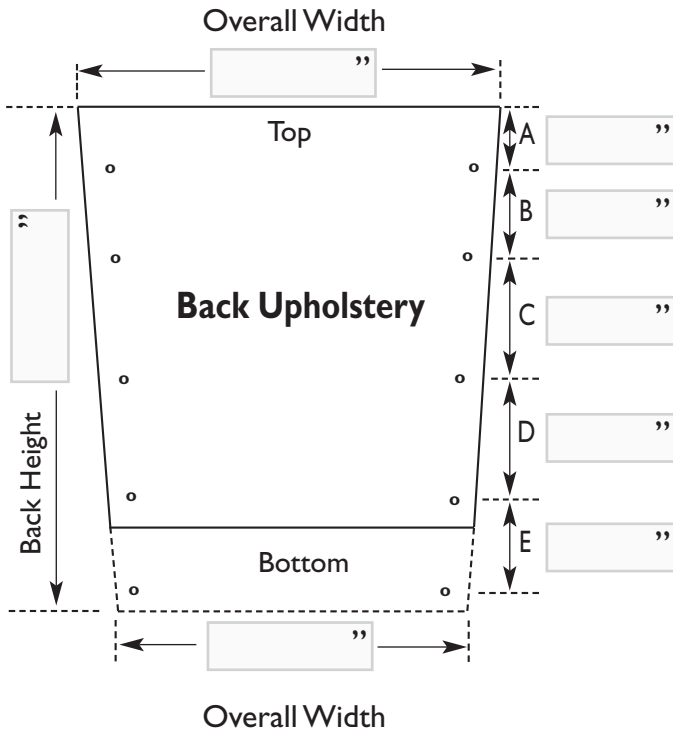


Cust # \_\_\_\_\_ Company \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Attn: \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_ PO# \_\_\_\_\_

Custom Upholstery Order Form



WC Mfr: \_\_\_\_\_ Model: \_\_\_\_\_

Quantity: \_\_\_\_\_

Embossing pattern:  E&J  Invacare  Flat

Color: \_\_\_\_\_ Foam: \_\_\_\_\_

2" webbing  double liner  cap

# holes each side. Special Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Quantity: \_\_\_\_\_

Embossing pattern:  E&J  Invacare  Flat

Color: \_\_\_\_\_ Foam: \_\_\_\_\_

2" webbing  double liner  cap

# holes each side. Special Instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Part Number	Description
Special	Non-Standard Size or Hole Spacing
	Double Liners
	2" Webbing
	Upholstery Caps
	Customer Logo
	Custom Color

Please use this form for better and faster service. Make copies of this form for future use. Fill in the dimensions using the shaded boxes provided. Then fill in the additional information and options using the shaded boxes on the remainder of this page.