

CUSTOMER #	P.O.#	DATE
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PROSTHETIST INFORMATION
BILLING

FACILITY/ATTN: _____

ADDRESS _____

CITY _____ STATE/ZIP _____

PHONE _____ FAX _____

CARRIER* UPS OTHER

*ORDERS SHIP UPS GROUND ON THE FOLLOWING DAY UNLESS SPECIFIED.

SHIPPING (LEAVE BLANK IF SAME AS BILLING)

FACILITY/ATTN: _____

ADDRESS _____

CITY _____ STATE/ZIP _____

PHONE _____ FAX _____

DATE REQUIRED _____ TIME _____

EMAIL _____

PATIENT INFORMATION

PROSTHETIST NAME	REQUISITIONER
PATIENT ID / NAME	
NOTES	

PART NUMBER
EXO MODEL
SJ90 BK

PART NUMBER
ENDO MODEL
SJ100 BK

INCLUDED
 AXIS Shoulder joint,
 mounting plate and
 hardware.

ADDITIONAL PARTS

PART NUMBER	DESCRIPTION
SJ60	3 Spoke Mounting Plate, Black
SJ63	Straight Mounting Plate, Aluminum
SJ43	Lock Release Kit
SJ45	Nudge Kit
SJ53	Boston Arm Endo Adapter Kit

PART NUMBER	QTY