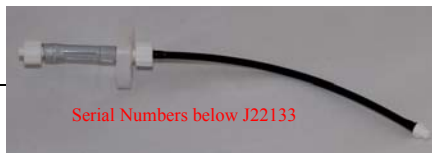
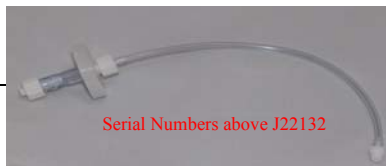
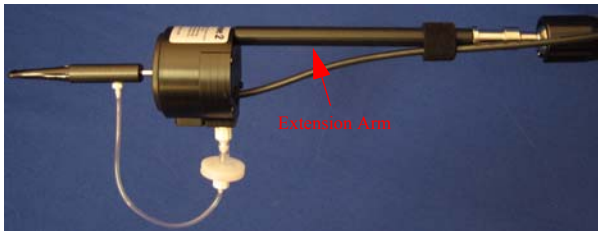
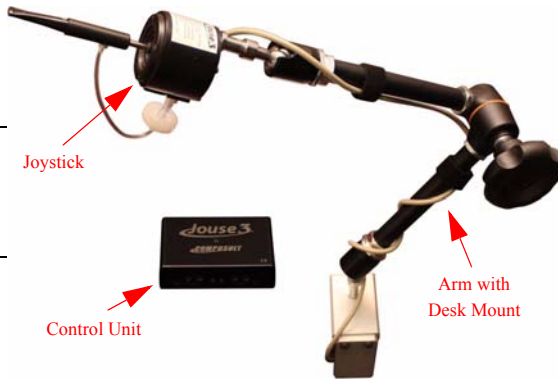


Jouse Accessories Order Form

Item Description	Qty	Price	Total
Jouse3 upgrade from Jouse2 (control unit only)		\$599.00	
Replacement joystick		\$399.00	
Replacement arm with desk mount		\$399.00	
Extra user accessories pack (includes mouthpiece, puff tube variety pack, 2 air filter assemblies, 5 small air tube connectors and 6" extension arm)		\$99.95	
Jouse toolkit (includes ratchet 9/16" socket, 9 piece hex key set, 2 air filter assemblies, puff tube variety pack, 5 small air tube connectors, 2 USB cables and carrying case)		\$129.95	
Super clamp (alternate mount suitable for wheelchair)		\$99.00	
Replacement mouthpiece (with puff tube variety pack)		\$49.95	
6" extension arm		\$29.95	
Air filter assembly, Qty 1 (Please check if S/N is before J22133 _____)		\$12.95	
Air filter assembly, Qty 5 (Please check if S/N is before J22133 _____)		\$59.95	
Air filter assembly, Qty 10 (Please check if S/N is before J22133 _____)		\$99.95	
Air filter assembly, Qty 20 (Please check if S/N is before J22133 _____)		\$159.95	
Disposable puff tubes, Qty 20 (10 short and 10 long)		\$19.95	



Item Description	Qty	Price	Total
Short cigarette style puff tubes, Qty 10		\$19.95	
Short cigarette style puff tubes, Qty 20		\$37.95	
Long cigarette style puff tubes, Qty 5		\$27.95	
Long cigarette style puff tubes, Qty 10		\$49.95	
Long cigarette style puff tubes, Qty 20		\$89.95	
Small air tube connectors, Qty 5		\$17.00	
Air tube assembly (for Jouse2 units with S/N J22132 & lower)		\$9.95	
Envelope Shipping Options (please select one): Ground: Canada \$20.00 _____ United States \$30.00 _____ Air: Canada \$30.00 _____ United States \$40.00 _____ Collect: \$0.00 _____ Preferred courier: _____ Acct# _____ Ground ___ Air ___ *Shipping to Alaska, Hawaii and non-continental US locations may require additional shipping charges. *Purchaser is responsible for paying any duties/taxes that may apply.			
Please indicate S/N of Jouse requiring accessories:			S/N _____
(applicable taxes extra) Total:			

Billing Information:	Shipping Information: (Same as Billing: ___)
Name:	Name:
Business:	Business:
Address:	Address:
City:	City:
Province/State:	Province/State:
Postal/Zip:	Postal/Zip:
Telephone:	Telephone:
e-mail:	e-mail:

Name on Credit Card _____ (Please Print) Today's Date: _____ Credit Card # _____ Expiration _____ CCV: _____ e-mail this form to our Assistive Technology team: at@compusult.net
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