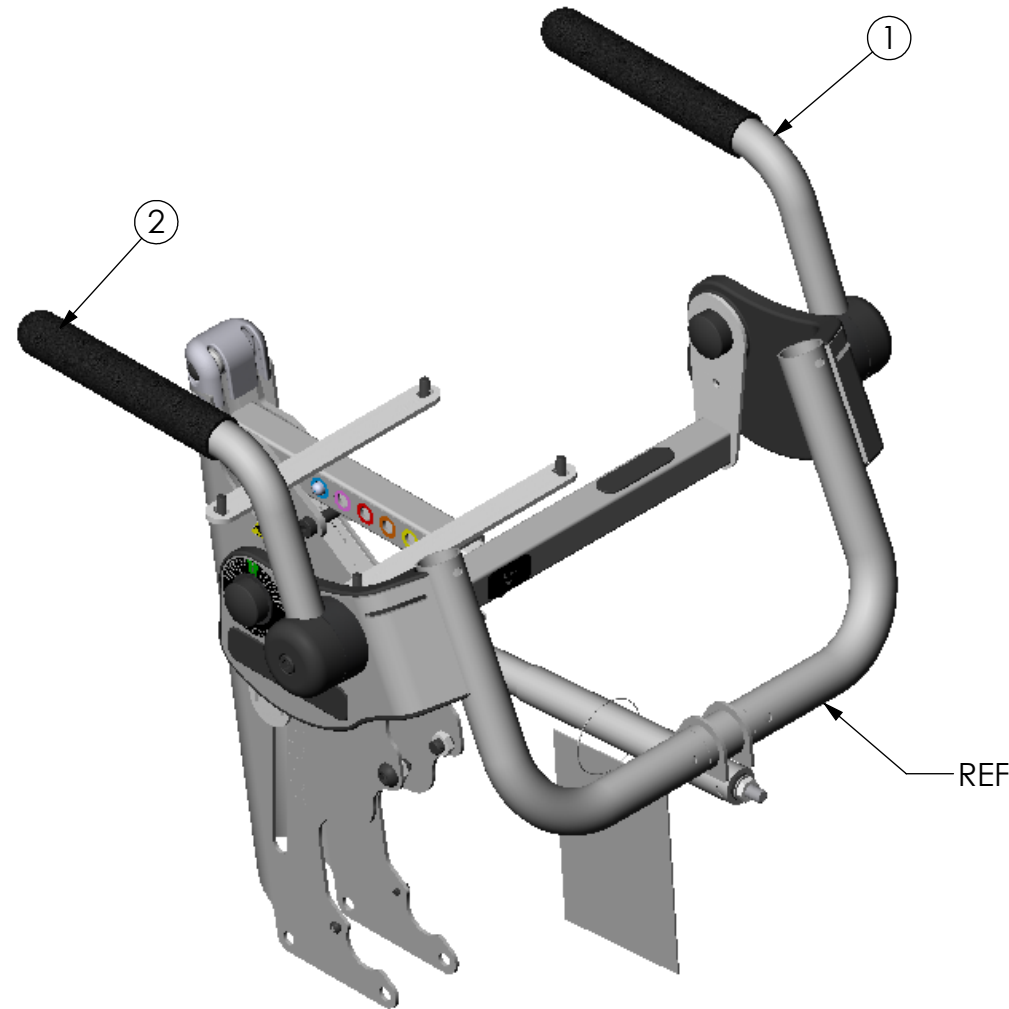


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REVISIONS				
REV:	DESCRIPTION:	ECO #:	DATE:	APPROVED:



ITEM NO.	PART NO.	REV	QTY.	NAME
1	NG50448	000	1	ASMBLY ARM REST EVOLV RH
2	NG50449	000	1	ASMBLY ARM REST EVOLV LH

IF BOX CONTAINS AN "X", SEE NOTES THAT APPLY TO EACH SUBJECT.

- SEE SHIPPING INSTRUCTIONS
- RECEIVING INSPECTION
- SEE ENVIRONMENTAL INSTRUCTIONS

APPROVED:	DATE:
DRAWN: JVS	DATE: 10/27/08
EXPIRATION DATE:	MATERIAL:
-	FINISH:
	CODE: ASMBLY

**UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES. TOLERANCES AND SPECS. ARE:**

DECIMALS	ANGLES
.X ± .1	.X ± .5°
.XX ± .03	
.XXX ± .015	
HOLE SIZE TOLERANCE: (+.005/- .000)	
BREAK EDGES .005 - .015	
CMFR DRILLED HOLES .03 X 45°	

**ALTIMATE MEDICAL, INC.**  
 PO BOX 180 - 262 WEST FIRST STREET - MORTON, MN 56270  
 PHONE (507) 697-6393 FAX (507) 697-6900

DESCRIPTION:  
 ARM REST ASSEMBLY EVOLV

SIZE DWG. NO. **NG50450** REV. 000

SCALE = 1:6 CAD FILE NAME: NG50450 SHEET 1 OF 1