

## AB Max<sup>™</sup> CEWire 2020 SPECIAL Order Form

		<sup>1</sup> - Advanc	ced Doc	tor's Tre	eatment f	or An	terior ]	Bleph	aritis			
Ship To: Practice:							Bill To:					
Dr. Name:							(if it's different)					
Addre	ess:											
City:												
State:												
Zip:												
Phone:												
Emai				1								
Salesperson:					g Terms:	FOB N	Мусо		Payme		s: Credit (	
Qty	Item #		Description							Uni	t Price	Total
			AB Max™ Starter Kit with Algerbrush									
	STARTER		AB Max <sup>™</sup> Adapter Handpiece with Charging Base									
			Algerbrush/Rust Ring Removal Powered Instrument									
			AB Max <sup>™</sup> /Algerbrush Chuck									
	KIT		5 - AB Max <sup>TM</sup> Procedural Packs						\$1,995.00			
	SPECIAL		AB Max <sup>™</sup> Anatomical Eyelid Model									
			AB Max <sup>™</sup> Demodex Mite									
			5 - i-Chek <sup>™</sup> Illuminated Self Examination Mirror									
			50 - AB Max <sup>™</sup> Tri-Fold Patient Brochures									
1	AB-10	00	AB Max <sup>™</sup> Adapter Handpiece with Charging Base						-\$	61,995.00	No Charge	
	AB-H	DPC	Algerbrush/Rust Ring Removal Powered Instrument						t	\$75.00		
	AB-CHK		AB Max <sup>™</sup> /Algerbrush Chuck								\$15.00	
6	AT-300-PVA-20		Box of 20 AB Max <sup>™</sup> Procedural Packs/\$14.95ea.								\$299.00	\$1,794.00
	EM-100		AB Max <sup>™</sup> Anatomical Eyelid Model								\$199.95	
	DM-1		AB Max <sup>™</sup> Demodex Mite								\$12.95	
	IC100	-BX-12							\$17.50ea	a/\$210/CS		
	TRAE	DE UP	TRADE IN Device							COST		
	Shipping		AB Max <sup>TM</sup> Starter Kit							US	/ INTL	\$45 / \$150
	Shipp	ing	AB Max <sup>™</sup> /Eyelid Model/Procedural Packs/Misc.						US	/ INTL	\$25 / \$75	
	Shipp								US	/ INTL	\$25 / \$75	
(shipping cost may change if multiple items are combined)									bined)		Total	
Credit Card Number												
Expiration Date							Se	curity	Code			
By signing this order form, you are authorizing Myco Industries, Inc. to charge your card for the amount listed above. Purchases within the state of Michigan will be assessed sales or use tax. It is the purchaser's responsibility to pay any applicable sales or use tax outside of Michigan.											ichigan will be	
Name	e:											
Signe	ed:									Date:		