

HENRY SCHEIN®

DENTAL

135 Duryea Road, Melville, New York 11747
(800) 645-6594

QUOTE#

20140523123418520

Date: 5/23/2014		Acct No: 205383		Install Date:	
Field Sales Consultant: Chris Cammann		Equipment Specialist: Jake Jones		Technology Specialist:	
Installation Address: 2064 Washington					
City: Twin Falls		State: ID		Zip: 83301-3071	
Phone: (208) 734-1515		Fax:			
New Acct:		Existing Acct:			
Henry Schein Dental					
2404 S. Orchard, #1000					
City: Boise		State: ID		Zip: 83705	
Phone: 208-433-1852		Fax: 208-433-0100			
Bill To: Dr. Joel N Newton					
Address: 2064 Washington					
City: Twin Falls		State: ID		Zip: 83301	
Deliver To: Joel N Newton					
Phone: (208) 734-1515					
Fax:					
Email:					

Qty	Manufacturer	Item Code	Description	Retail Price	Price	Total
1	CPIINT	643-5483	Chair,Hydraulic,Asep.Styl	\$6,610.00	\$3,980.00	\$3,980.00 *
1	CPIINT	643-1258	Allianc SwingMt Dntl Unit	\$3,680.00	\$2,477.00	\$2,477.00 *
1	CPIINT	643-2201	Asst.Vacuum/Utility Group	\$1,165.00	\$784.00	\$784.00 *
1	CPHINT	643-1244	Light on Curved Post,110v	\$1,660.00	\$1,118.00	\$1,118.00
1	ARIBEX	844-1818	NOMAD Pro2 60kV X-Ray WHT	\$7,795.00	\$6,447.00	\$6,447.00 *
1	BRWCUS	550-9290	3125B DOCTORS STOOL	\$615.90	\$380.00	\$380.00
1	BRWCUS	550-0467	3145L Assistants Stool	\$836.00	\$548.00	\$548.00
1	MIDMAK	564-6769	PowerAir Oilless Comp 1-3	\$6,005.00	\$4,139.00	\$4,139.00 *
1	MIDMAK	386-7749	Classic-Ser.Sngl Vacuum	\$2,768.00	\$1,908.00	\$1,908.00 *
1	INSTRM	171-0189	SnapShot I-O Sensor Kit 2	\$9,195.00	\$7,405.00	\$7,405.00
1	INSTRM	550-5761	ClinicView XV Softwre w/5-User	\$1,025.00	\$1,025.00	\$1,025.00
1	DENTA	104-9316	Acclean Pro Ultrasonic Scaler	\$354.99	\$288.00	\$288.00

Subtotal: \$30,499.00 29381
 Freight: \$300.00
 Tax: \$1,847.94 1184.10
 Discount: \$11,210.89
 Total: \$32,646.94 30865.10
 Deposit: \$3,264.70
 Balance Due: \$29,382.24

Henry Schein Financial Services Cash/Bank Financing

SSN*: _____ SSN*: _____
 DOB: _____ Bank Name: _____
 Credit Card #: _____ Bank Officer: _____
 Expiration: _____ Bank Phone: _____

THIS ORDER IS SUBJECT TO THE TERMS AND CONDITIONS APPEARING HEREON ON THE FOLLOWING PAGES, AND ANY SUPPLEMENTAL TERMS AND CONDITIONS THAT WE PROVIDE WITH ANY PRODUCT PURCHASED HEREUNDER AND THE PURCHASER AGREES TO BE BOUND THEREBY
 Payment Terms: Minimum 10% deposit to initiate order with balance to be paid on the delivery of equipment or , whichever occurs first.

X _____ Date _____ X _____ Date _____
 Purchaser's Signature Sales Specialist

 Acceptance by Henry Schein Dental Date _____

Prices are in effect until _____
 Special Instructions

* Equipment to be purchased by Blue Lakes Rotary
 \$19,735 + 1184.10 (tax) + \$250 (freight) = 21169.10