



Order Date: _____

**Fax Completed Form to 914.992.9155, or
Call Sciton Staff at 650.493.9155**

Delivery Date: _____

Item	Item #	Description	Qty. (# of packs)	Unit Price	Line Total
Hair Removal	2600-013-00	Patient Brochures (100 pcs/pack)		\$100	
Laser Skin Peel	2600-016-00			\$100	
Laser Skin Rejuvenation, 1319	2600-015-00			\$100	
MicroLaserPeel™	2600-010-00			\$100	
Laser Veins & Redness	2600-014-00			\$100	
Phototherapy, BBL	2600-023-00			\$100	
ProLipo <i>PLUS</i>	2600-028-00			\$100	
ProFractional	2600-027-00			\$100	
Pro-V Laser Treatment	2600-025-00			\$100	
SkinTyte™	2600-026-00			\$100	
Nail Fungus	2600-012-00			\$100	
Resurfacing Perfected	2600-017-00			\$100	
Patient Testimonial DVD	2600-009-04	each		\$10	
Clinical Results Before and After Photo Book	2700-003-00	each		\$250	
Practice Support Main Kit	2700-001-00	each		\$350	

Shipping Method

- ☐ FedEx 1 Day ☐ FedEx 2 Day
☐ FedEx 3 Day ☐ UPS 2-7 Days

Subtotal

Shipping

Sales Tax

Total

Shipping Information

Contact Name:

Business Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Laser Serial Number:

Cust #:

Billing Information

☐ VISA ☐ MasterCard ☐ AMEX

Name (as it appears on card):

Credit Card Number:

Expiration Date:

SCC Code:

Billing Address:

City:

State:

Zip:

Signature:

Date:

For Internal Use Only

☐ Verify Address

☐ Taxable

☐ Tax Rate _____%