

AC'CENTS FAX ORDER FORM

(Motorized Units)

DATE: _____ P.O. #: _____

NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

PHONE: _____ FAX: _____

ORDERED BY: _____ SPECIALTY: _____

BILLING (if different): _____

UPS 1 DAY: _____

UPS 2 DAY: _____

UPS 3 DAY: _____

UPS GROUND: _____

OTHER: _____

DELIVER BY:

LASHLINER PIGMENTS		DISPOSABLE NEEDLE TIPS	
1201 Grey	\$39.00	1352D: 3 Needle 26 gauge Tip	N/A
1202 Black	\$39.00	1354D: 3 Needle 28 gauge Tip	\$49.00
1203 Dark Brown	\$39.00	1356D: 7 Needle 28 gauge Tip	\$59.00
1204 Med. Brown	\$39.00	CHROMA PIGMENT SERIES	
1205 Light Brown	\$39.00	1220 Chroma 0	\$39.00
ACCESSORIES		1221 Chroma 1	\$39.00
1620A Color Palette	\$ 6.00	1222 Chroma 2	\$39.00
1210A Petri Dish-Sterile	\$ 5.00	1224 Chroma 3	\$39.00
1365A Dip Formed Sleeve	\$ 3.60	1225 Chroma 4	N/A
1101F Foot pedal	\$30.00	1226 Chroma 5	\$39.00
1101E Extension Cord	\$15.00	1227 Chroma 6	\$39.00
		1228 Chroma 7	\$39.00
		1232 Chroma 8	\$39.00
1360A Replacement Motorized Hand piece	\$ 1500.00	1230 Rose	\$39.00
Black Storage and Carry Case	\$30.00	1231 Deep Red	N/A
1301 MVSS	AC'CENTS Motorized Variable Speed System w/ Hand piece		\$2,000.00

Credit Card #: _____ Exp. Date: _____

NEWPORT MEDICAL PRODUCTS, INC.

TEL: #800-488-4848

E-mail: newportmed@aol.com Web Site: www.newportmedicalproducts.com

AS OF JUNE 10, 2024