

# KMI IMI GROUP CUSTOM CANNULA ORDER FORM

PHONE: 949.458.1897 FAX: 949.458.7316 sales@imibeauty.com

Please email or fax order form. Form must be filled out completely and signed.

**Billing Information:**

Company: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Ship To: (  Check if same as Billing Information)

Company: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Payment Method:**

CC Type: (circle) VISA MasterCard American Express  
CC Number: \_\_\_\_\_  
Exp Date: \_\_\_\_\_  
Security Code: \_\_\_\_\_

**FedEx Shipping Options:** (FedEx acct#: \_\_\_\_\_)

Ground For International Orders Only  
 Standard Overnight  International Priority  
 FedEx 2 Day  International Economy  
 Express Saver (3 day)

Have you ordered from KMI IMI GROUP before?  
 Yes  No

\*\*Shipping costs may vary according to weight and destination. Shipping costs will be determined once order is ready to ship and will be charged to your credit card or FedEx acct# if applicable.

QTY.	ORIFICE PATTERN	TIP	DIAMETER	LENGTH	HANDLE/HUB	CURVE	NOTES	TOTAL

**HANDLES, ETC.**

ITEM	ITEM NUMBER	DESCRIPTION	PRICE (EACH)	QUANTITY	TOTAL
	IM-QSD-L	Delrin Aspiration Handle - Large <input type="checkbox"/> Swivel <input type="checkbox"/> Non-Swivel			\$
	IM-QSD-S	Delrin Aspiration Handle - Small <input type="checkbox"/> Swivel <input type="checkbox"/> Non-Swivel			\$
	IM-LAHD	Luer Lock Aspiration Handle			\$
	IM-TH	Toomey Syringe Handle			\$
	IM-INFIL-NC	Standard Infiltration Handle			\$
	IM-INFIL	Infiltration Handle w/ On/Off Control			\$
	IM-EP	Epidermis Punch			\$

Purchase Order No.: \_\_\_\_\_  
Date: \_\_\_\_\_

Subtotal	
California residents add 8% sales tax	
Total	

Prices are subject to change without notice. For price changes/ confirmation, please call 949.458.1897 or email sales@imibeauty.com  
I agree to the purchase of these items, have my credit card charged for the amount of the products plus shipping and any applicable taxes (including California sales tax of 8% and MDET tax of 2.3% if applicable). I have read the terms and conditions page (www.kmiimigroup.com) of KMI IMI GROUP, including the return policy. I understand and agree with the policies of KMI IMI GROUP.

Name and Title: \_\_\_\_\_ Signature: \_\_\_\_\_