

Bluminator Order Form - 2010

Name: _____

Practice Name: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____

Credit Card No.: _____ Expiration Date: _____

Signature: _____ Date: _____

Here's my order:

Prices effective January 2010.

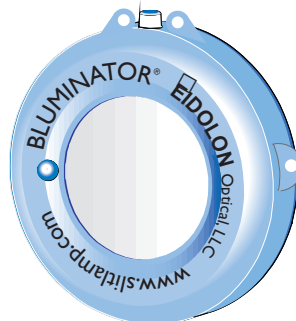
Send me _____ **Eidolon Bluminator Ophthalmic Illuminator(s)** at \$65.00* each.
___ Blue LED / Clear Lens ___ White LED / Clear Lens ___ Blue LED / Yellow Filter Lens

Send me _____ **Bluminator Kit(s)** with lanyard, fluorescein strips, hard carrying case at \$95.00* each.
___ Blue LED / Clear Lens ___ Blue LED / Yellow Filter Lens

Send me _____ **Case(s) of (10) Bluminators** at \$585.00* each (save 10%).
___ Blue LED / Clear Lens ___ White LED / Clear Lens ___ Blue LED / Yellow Filter Lens

**Please add \$5.00 to your total order for shipping and handling within the U.S.*

Please complete this order form and fax it back to us at (508) 651-0613.



Eidolon Bluminator
U.S. Patent No. 6,547,394