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| [Logo_JPG](http://www.medicalinnovations.com/index.htm) | **Endo X Trainer™**  **Patent Pending**  PRICE LIST\*\* |

Kits:

**EX 60001 Endo X Trainer™ Kit $3684**

Contains:

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| **Part Number** | **Description** | **Price** |
| EX60003 | Upper GI Tray | $1,482.00 |
| EX60004 | Lower GI Colon Tray | $1,482.00 |
| EX60005 | Hand Carry Case | $ 350.00 |
| EX60007 | Upper GI Adapter | $ 185.00 |
| EX60008 | Lower GI Adapter | $ 185.00 |

**EX 60002 Endo X Trainer™ Tote Kit $4079**

Contains: contains the same parts as the above Kit but comes with a Tote Case with wheels, handle and padding for airline travel.

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| **Part Number** | **Description** | **Price** |
| EX60003 | Upper GI Tray | $1,482.00 |
| EX60004 | Lower GI Colon Tray | $1,482.00 |
| EX60005 | Tote Case safe for airline travel | $ 745.00 |
| EX60007 | Upper GI Adapter | $ 185.00 |
| EX60008 | Lower GI Adapter | $ 185.00 |

**Cover:**

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| **Part Number** | **Description** | **Price** |
| EX60009 | Upper & Lower Tray Cover  One cover fits either tray | $ 790.00 |

\*\*All prices are USD. Shipping and handling charges apply. Shipping prices vary upon location and timing. Sales taxes may apply. International orders are subject to prepayment. Prices subject to change without notice.

**To Order:**

Call 1-507-289-0761 Fax 1-507-281-9096

Email: [info@medicalinnovations.com](mailto:info@medicalinnovations.com)

Medical Innovations International Inc. 6256 34th Avenue NW, Rochester, MN 55901

Website: Medicalinnovations.com

**Endo X Trainer Order Form**

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| **Date:**  **Purchase Order Number:**  **Name:**  **Organization**  **Phone: Fax:**  **Email:** | **WAYS TO ORDER**:  Medical Innovations International  6256 34th Ave NW  Rochester, MN 55901 USA  Fax: 507-281-9096  Phone: 507-289-0761  Email: Info@medicalinnovations.com |

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| **Billing Address:**  **Address:**  **City**  **State**  **Zip Country** | **Shipping Address (if different from Billing):**  **Address:**  **City**  **State**  **Zip Country** |

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| **Part Number** | **Description** | | **Price** | | **QTY** | **Amount** | | |
| EX60001 | Endo X Trainer™ Kit | | $3,684.00 |  | | | |  |
| EX60002 | Endo X Trainer™ Tote Kit | | $4,079.00 |  | | | |  |
|  |  | |  |  | | | |  |
| EX60003 | Upper GI Tray | | $1,482.00 |  | | | |  |
| EX60004 | Lower GI Colon Tray | | $1,482.00 |  | | | |  |
| EX60005 | Hand Carry Case | | $ 350.00 | |  | | |  |
| EX60007 | Upper GI Adapter | | $ 185.00 | |  | | |  |
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|  |  | |  | |  | | |  |
| EX60009 | Upper & Lower Tray Cover | | $ 790.00 | |  | | |  |
|  |  | |  | |  | | |  |
|  | | Total Before Shipping |  | |  | | $ | | |
|  | | Shipping Cost (call for estimate) |  | |  | |  | | |
|  | | Total Amount Due |  | |  | | $ | | |

**Payment Options:**

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| **€** | **Check Enclosed,** drawn on a US Account in USD dollars, Check # \_\_\_\_\_\_\_  **If the bank routing number on the check does not have 9(nine) digits, there is an additional $25 check cashing fee (bank charge).** |
| **€** | **Wire Transfer** (Email for Instructions) [usually for international orders] |
| **€** | **Credit Card #**  **Card Billing Zip Code:**  **Name on Credit Card:**  **Expiration Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature:** |