COMPANY NAME DOCTOR'S NAME ADDRESS PHONE # FAX # FOR MONTHLY BILLING PLEASE COMPLETE REQUIRED FIELDS ONLY NEEDED ON FIRST ORDER TAX LD. OR "SOCIAL SECURITY # "LICENSE NUMBER "DRIVER LICENSE # OTY ITEM # DESCRIPTION UNIT PRICE TOTAL OTY ITEM # DESCRIPTION UNIT PRICE TOTAL
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All sales Final, Equipment None Returnable
Credit Card Payment: Master Card, Visa, Amex, Discover
Card Number
Expiration Date
3 Digit Security Code on Back Applicable Sales Tax And Shipping Charges
By accepting the merchandise I hereby agree to pay interest on all overdue Will Be Added To Your Order.
invoices at the rate of 2.5% per month, and to pay all costs of collection including reasonable attorney fee's. I agree to the Terms and conditions page also sent with this order form!
All claims for shortages or defective merchandise must be no later than 3 days from invoice.
RETURN POLICY: If you cancel your purchase for any reason within 7 days from date of receipt, we'll refund your purchase price minus shipping costs and
a 25% re-stocking fee. Any orders placed and later cancelled by the purchaser will be subject to the same 25% restocking fee, also some orders are then placed with the manufacturer and can not be cancelled.
Returns must be authorized by & shipped back to Lions Dental Supply within 7 days of date received by the customer. Does not include special order items.
You are responsible for the cost of shipping the product back to us. Special order items and custom made products are not returnable At All.
All Handpieces, Equipment & Equipment Parts are special order. Opened Equipment or Handpieces may not be returned, but will be repaired or replaced according to the manufacturer policy.
There is no trial period, We do not allow you to test out our products And then ask for a return or credit.
There is no that period, we do not allow you to test out our products

PAYMENTS: If paying by check and it is returned there will be a \$ 50 charge plus any other fees that arise from the returned check, and any other fee's for collection. For any claim or cause of action arising I agree to waive venue & Jurisdiction, By purchasing products from Lions Dental Supply I agree to venue in Riverside County, CA and it being governed in accordance with the laws of Riverside County , CA, for all court cases.