

401 Pescado Place
Encinitas, CA 92024
ph: 408.221.5889
finance@healthevolution.tv

PLEASE FAX TO
619-764-4026

Invoice #	
Invoice Date	
Consultant Name	
Consultant Phone #	
Consultant email	

PULSE ORDER FORM

BILL TO:	SHIP TO:
Name: <input type="text"/>	Name: <input type="text"/>
Address: <input type="text"/>	Address: <input type="text"/>
City: <input type="text"/> State: <input type="text"/>	City: <input type="text"/> State: <input type="text"/>
Phone: <input type="text"/> Zip: <input type="text"/>	Phone: <input type="text"/> Zip: <input type="text"/>
Email: <input type="text"/>	Email: <input type="text"/>

QTY	PRODUCT DESCRIPTION	UNIT PRICE	WARRANTY *Freight/Insurance on warranty work not included.	PAYMENT TYPE	TOTAL
			5 years on parts and labor		
			5 years on parts and labor		
			5 years on parts and labor		

Wire:

Check here to pay by wire

Amount: \$ _____

Bank Wiring Information:
Please call for current wire coordinates.



TAX	...included in unit price
SHIPPING & INSURANCE	
OTHER	
TOTAL DUE	

Check here for financing

Credit Card

Name	<input type="text"/>
CC#	<input type="text"/>
Exp. Date	<input type="text"/>
Sec Code	<input type="text"/>
Amount \$	<input type="text"/>
Billing address for card	<input type="text"/>

In your comprehensive training, you will:

- Learn basic instructions for operation
- Become skilled at effectively using all three magnetic coils for varying conditions
- Review contraindications
- Practice answering commonly asked questions
- Clarify your marketing strategy
- Receive marketing tools such as gift cards, release forms, and patients fliers in an "e-file" (digital) format ready for email and/or printing.

X _____
Signature

[Purchaser signature authorizes PEMF Systems to process credit card payment for purchase]

Notes: _____ **All Sales Are Final.**