*cryo*EMBEDDER®

PRICE LIST AS OF January 2015
ORDER FORM Date_____

3434 East 7800 South #131
Salt Lake City, Utah 84121
Phone 1-800-447-0718
Fax 1-801-453-0187
www.cryoembedder.com

Name_____

Business_____

Address_____

City_____

State_____ Zip_____

Phone_____ Fax_____

***cryo*EMBEDDER® Package Purchase**

Item #		No. Units	Total Cost
001	Complete *cryo*EMBEDDER® Package…$1795.00 *(includes items 001 through 008 listed below)*	_____	_____
	Plus shipping per unit (see instruction 2below)	_____	_____
Total			_____

Individual Purchases

Item #			No. Units	Total Cost
002	Embedding Device	$1,395.00 ea	_____	_____
003	Small Flat Steel Disc 30mm	18.00 ea	_____	_____
004	Large Flat Steel Disc 40mm	32.00 ea	_____	_____
005	Adaptors (IEC, Leica, Thermo)	40.00 ea	_____	_____
006	Cutting Board	78.00 ea	_____	_____
007	Button Holder	450.00 ea	_____	_____
008	Instructional CD	15.00 ea	_____	_____
009	*cryo*CHUCK® (Cryostat Chuck) - 30mm (Leica)	49.00 ea	_____	_____
009a	*cryo*CHUCK® (Cryostat Chuck) - 40mm (Leica)	69.00 ea	_____	_____
010	***cryo*CHUCK® (Cryostat Chuck) - 30mm (Avantik)**	49.00 ea	_____	_____
010a	*cryo*CHUCK® (Cryostat Chuck) - 40mm (Avantik)	69.00 ea	_____	_____
011	2oz. Dyes a) black b) blue c) green d) yellow e) violet	35.00 ea	_____	_____
012	Large Flat Steel Disc 55mm	69.00 ea	_____	_____
013	*cryo*CHUCK® (Cryostat Chuck) – 55mm (Leica)	89.00 ea	_____	_____
013a	*cryo*CHUCK® (Cryostat Chuck) – 55mm (Avantik)	89.00 ea	_____	_____
Total *plus shipping (see instruction 2 below)*				_____

Forms of Payment:

1) Credit card payment: Log on to www.cryoembedder.com and place order on site
2) Check: Mail total plus $59.95 for standard shipping or $74.95 for overnight shipping for a complete *cryo*EMBEDDER® package; or $29.95 for standard shipping for individual purchases of Items 002, 007; or $10.00 for standard shipping on items 003, 004, 005, 006,008, 009, 009a, 010, 010a to 3434 East 7800 South #131 , Salt Lake City, Utah, 84121.
3 Call Purchase Order number to 1-800-447-0718 and an invoice will be mailed.
4) Mail, fax or call in credit card information and invoice will be mailed back with product indicating paid with credit card.

Card type _____
Card number _____
Name on card _____
Expiration date _____

Business address on card_____
_____
_____

Cryostat Make_____

Signature _____