

PURCHASE AGREEMENT for VenaPulse® Device

This agreement is between ACI Medical, Inc. (hereafter called ACI) and the Buyer of the equipment named below (hereafter called Buyer). I/we agree as follows. (Please print or type all information.)

Buyer's Name		
Shipping Address		
City, State, Zip or Province, Country, Postal Code		
Telephone No	_ Fax. No	
VISA/MasterCard/Am.Express#(circle one)		Exp. Date Security Code
Name on Credit Card	····	
Billing Address (If different from above address)		
City, State, Zip		
Ship by: (Ex: Overnight, 2 nd day, 3 rd day, ground)	

Buyer agrees to purchase the VenaPulse® device (hereafter called VenaPulse® or device) from ACI using the credit card number described above for:

VenaPulse device includes: main controller, 2 sets of tubing, one foot compression cuff, one leg compression cuff, foot switch, hospital grade power cord, operations and service manual.

Sales Tax applies to some states.

Warranty: ACI warrants to Buyer that goods sold to Buyer will perform in accordance with the applicable data sheet or agreed-on specification and at the time of sale will be free from defects in material and workmanship. For instruments and non-expendable accessories, this warranty shall apply for a period of 1 year from the date of delivery unless the goods have been subject to misuse, accident, damage, improper installation or maintenance, or alteration or repair by any one other than ACI or its authorized representative. Cuffs and expendable items are guaranteed from defects at the time of delivery. Buyer shall notify ACI promptly in writing of any claim based on this warranty. ACI MAKES NO OTHER OR FURTHER WARRANTY, EXPRESS OR IMPLIED, INCLUDING ANY WARRANTY OF FITNESS FOR A PARTICULAR PURPOSE OR WARRANTY OF MERCHANTABILITY.