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STROPKO IRRIGATOR

Name: _____ Date: ____ - ____ - ____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ - _____ - _____ Fax: _____ - _____ - _____

Email: _____

- 1 for \$95 • 3 for \$270 • 6 for \$510 • 10 for \$800 • 12 for \$900
(95-) (90-) (85-) (80-) (75-)

_____ XL Length (3.5") \$ _____

_____ Original Size (2.0") \$ _____

Minimum Shipping & Handling \$ 5.00

Additional S & H @ \$1 per unit x _____ units \$ _____

TOTAL \$ _____

Adapter for older syringes: YES NO

CC Type: AX VISA M/C

CC# _____ - _____ - _____ - _____ Exp _____ - _____ Code _____
(3 digits)