



# ACR PHANTOM ORDER FORM

Data Spectrum Corporation

## American College of Radiology - Nuclear Medicine/PET Accreditation Program

Completion of this form is a required to purchase a phantom for accreditation. If you are paying in advance, please attach form to your check. Phantoms will not be shipped to your facility if this form is not sent to directly to Data Spectrum Corporation. Either fax or email the completed form to:

**Data Spectrum Corporation**

**437 Dimmocks Mill Road Suite 17, Hillsborough, NC 27278**

**Phone: (919) 732-6800 Fax: (919) 732-2260 Email: lgk@spect.com**

Description	Model	Costs	Qty.	Total
PET Only: Flangeless Esser PET Phantom	ACR PET/FL/P	\$2,028.60		
PET & Nuclear Medicine: Flangeless Esser PET Phantom, 2 <sup>nd</sup> Deluxe ECT Lid	ACR PET/FL-X2/P	\$2,536.54		
Nuclear Medicine Only: Flangeless Deluxe Jaszczak Phantom	ACR ECT/FL-DLX/P	\$1,521.45		
Esser PET Lid (faceplate is made to fit an existing flangeless or flanged ECT phantom) Call if ordering Lid only	ACR PET/LID/REG ACR PET/LID/FL	\$1,017.45		

**Shipping & Handling charges** based on actual UPS charges the day product is shipped. If a check is sent for any of the above amounts only, you will be billed for this. If you need the exact charges, please fax this completed form to Data Spectrum Corporation.

**If product is to be used in North Carolina**, are you taxable? Yes No

If no: North Carolina exemption number: \_\_\_\_\_ If yes: tax rate: \_\_\_\_\_

- Send invoice to Bill To Address listed below Your PO # \_\_\_\_\_
- Fee enclosed in the form of a check, payable to Data Spectrum Corporation, for the amount of \$ \_\_\_\_\_, call for shipping charges. (*Checks should include the name of the facility*)
- Credit-card payment in the amount of purchase, including shipping & handling, you may call in the number if you prefer not to write it down on this form.
- Master Card  Visa Card  American Express #: \_\_\_\_\_

V Code : \_\_\_\_\_ (must be completed) Expiration Date: \_\_\_\_\_

Card Holder: \_\_\_\_\_

For questions related to payment or shipment of phantom, please contact Customer Service at (919) 732-6800 Fax: (919) 732-2260 (note: Data Spectrum Corporation tax ID#: 56-131-4988)

<b>For PET PETAP #:</b>		<b>For Nuclear Medicine NMAP #</b>	
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**Above must be completed to process order, failing to do so will delay processing your order.** If above information is not available call Carolyn Richards MacFarlane at the ACR 800-227-5463 x 4563, she will OK your site to us.

<b>Facility Name:</b>			
<b>Shipping Address:</b>			
<b>Bill To Address:</b>			
<b>Contact Name:</b>			
<b>Contact Email:</b>			
<b>Contact Telephone:</b>		<b>Contact Fax:</b>	

**Signed:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This is a required form. Attach it to your check when ordering your site's phantom. Phantoms will not be shipped to your facility if this form is not sent to directly to Data Spectrum Corporation.**