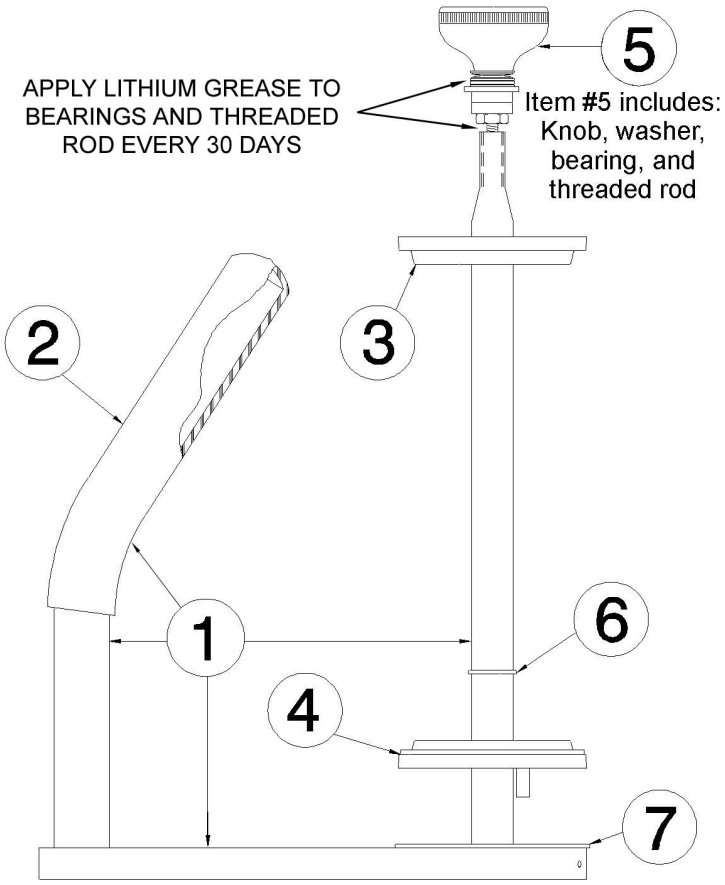
# HIGHLIGHT INDUSTRIES, INC.

# HANDWRAPPER REPLACEMENT PARTS

Phone: 616-531-2464 Fax: 616-531-0506




**For models HD1218-300 and HD1820-300.**

| ITEM NO. | DESCRIPTION | PART NO. | QTY | PRICE/EA |
|---|---|---|---|---|
| 1 | Base Assembly for 12"* Handwrapper | 745054 | | $37.00 |
| 1 | Base Assembly for 18"* Handwrapper | 745055 | | $37.00 |
| 2 | Grip | 309002 | | $4.50 |
| 3 | Top Core | 315001 | | $8.95 |
| 4 | Bottom Core | 745322 | | $9.95 |
| 5 | Knob Assembly | 745051 | | $9.95 |
| 6 | O-Ring | 304477 | | $0.50 |
| 7 | Dampening Washer | 520021 | | $2.00 |

* To determine size, measure height from bottom of base to top of pole.

***PRICES SUBJECT TO CHANGE WITHOUT NOTICE***

| | |
|---|---|
| Total Parts Cost (**TPC**) | $ |
| If **TPC** is under $50.00, add handling charge | $ 8.00 |
| Michigan customers add 6% sales tax on **TPC** | $ |
| If paying by COD add $7.00 | $ |
| Shipping Charge | $ 7.65 |
| TOTAL DUE | $ |

**METHOD OF PAYMENT**

- COD (surcharge required)
- Pay by Check. Mail check & form to:
  Highlight Industries, Inc.
  2694 Prairie St SW
  Grand Rapids, MI 49519-2461
- Pay by Credit Card *(check one):*
  ❒VISA ❒MasterCard
  ❒American Express
  Card Expiration Date (MM / YY)
  _____ / _____

| **BILLING ADDRESS:** | **SHIP ORDER TO:** |
|---|---|
| COMPANY: | COMPANY: |
| ADDRESS / P.O. BOX: | ADDRESS: |
| CITY: | CITY: |
| STATE / ZIP: | STATE / ZIP: |
| INITIATED BY: | ATTENTION: |
| PHONE NO.: | PHONE NO.: |
| FAX NO.: | |
| PURCHASE ORDER NO.: | PURCHASE ORDER NO.: |

Credit Card # ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Signature _____