2026 Special Equipment Financing

safco Dental Supply

Exclusively for Purchases through Safco Dental
100% Financing
Include 30% Soft Costs
Same Day Approvals with Good Credit
Fixed Rates with Early Prepay Available
Good For Purchases Over $10,000
2 Year Time License or Time in Business Required
No Additional Collateral Required
Soft Credit Inquiry, Debt Not Reported to Personal Bureau
Good for Applications Received and Approved by 12/31/2026

Tax Benefits and Monthly Payments

Take advantage of 2026 Section 179 Tax Savings on your next capital equipment purchase

Equipment Cost:	$10,000.00
Allowable Section 179 Deduction: (Maximum of $2,560,000 in 2026)	$10,000.00
Total 1st Year Deduction:	$10,000.00
Estimated Marginal Tax Rate:	32%
Tax Savings:	$3,200.00
After-tax Equipment Cost:	$6,800.00

This is an example tax scenario. Please contact your tax advisor to realize your true tax savings. Equipment purchases over $2,560,000 could be subject to an additional 100% bonus depreciation available in 2026 as well as standard depreciation rules. Please contact us directly for a tax quote on amounts over $500,000.

Special Financing Terms

Equipment Finance Agreement
Equal Monthly Payments

12 Months **0%** Financing
$ 833.30

24 Months **2.9%** Financing
$ 429.80

36 Months **3.9%** Financing
$ 295.20

Additional structures and deferred options available upon request. $50,000 Minimum for 84 Month Terms

Return On Investment

Equipment Description:
Procedure Type:
Number Of Procedures Per Month: 20
Fee Per Procedure: $ 165.00
Total Monthly Billings: $ 3,300.00

Enter Monthly Payment From Options Above: $ 1,074.50

Net Income	Return on Investment
$ 2,225.50	207%

Quick Application

Please complete all fields. Any missing information will delay the processing of your request. Complete additional form for each legal owner with 20% or more ownership.
Fax to 888-366-2398 or Email to helen@finservices.com

Doctor/Owner Name: SSN: Date of Birth:
Specialty: Prof. License #: Years Licensed: Ownership %:
Legal Business Name: Tax ID #:
Year Business Est: Title: *(Under Legal Entity)* Email:
Business Address: *(City , State & Zip)*
Business Phone: Fax: Mobile#:
Equipment Vendor: Sales Rep:
Amt. Needed: $10,000.00 Term: ☐ 12mo ☐ 24mo ☐ 36 Mo.
Applicants Signature: Date:

Apply Now!

Want to know more?
For more information please contact:

Helen Giotopoulos Kaminski
Office: 800-232-7526
Fax: 888-366-2398
Mobile: 404-512-4361
E-mail: helen@finservices.com

Signing, faxing or emailing this application to Group Financial Services authorizes Group Financial Services, its designees(s), assignee(s) or any lending source to whom this application is submitted ("Us") to review or obtain any information it may request from any business or consumer reporting agencies; such authorization shall extend for the purposes of updating, renewing or collecting on the account. Additionally, this authorization permits us to share and exchange information and to request, obtain and review bank, financial or other information from past, present, or potential creditors. All programs, rates, terms and amounts are subject to equipment review, credit approval, professional time licensed and time in business verifications. Other terms and structures may be available upon request. First payment and small processing fee of $299 due with final contract. All payments are subject to any applicable sales tax and shipping. Call for terms on transactions under $10,000. Upon approval terms are confirmed but rates may be subject to change at the first of each month based on reflected changes in Like U.S. Treasuries Rates and Federal Reserves Rates and date of final loan closing. Rate and term are fixed once loan closes. Good for applications received and approved by 12/31/2026. Deal must fund within 30 days to qualify.