

McLaren Print System Order

Order No: 42721 Reprint Previous Order No: 22269
Order Date: 2019-02-07
User: TINA PLAUTZ
Phone:

Ship Location: MCLREN OAKLAND WATERFORD MEDICAL ASSOCIATES
3560 PONTIAC LAKE RD
WATERFORD, MI 48328

Forms

Quantity: 100
Paragon Dept No: 73000
Dept Name:
Company Number: 810

Order Total Price: 0.00

Item Number: FAX-174
Item Description: Waterford Medical Associates
Revision Date: 9/2016
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Misc Info:



WATERFORD MEDICAL ASSOCIATES
3560 Pontiac Lake Road - Waterford, MI 48328

Fax Cover Sheet

Date: _____ Time: _____

To: _____

From: Waterford Medical Associates, Department: _____

Telephone: (248) 674-2259 Fax: (248) 674-3356

NUMBER OF PAGES: _____ (including cover sheet)

REMARKS: _____

If your clinic is capable of sending and receiving electronic referrals through your [MIR (Meaningful Use Requirement)] please contact us so we can exchange direct message ID's.

If this facsimile has reached you in error, please contact the above person immediately. Your assistance is appreciated. Thank you.

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