

McLaren Print System Order

Order No: 45010
Order Date: 2019-05-01
User: Pam Gross
Phone: 989-667-3410

Ship Location: West Side Medical Mall
4175 Euclid Ave Suite 9
Bay city, MI 48706

Forms
Quantity: 8
Paragon Dept No: 69580
Dept Name:
Company Number: 210

Order Total Price: 30.32

Item Number: RXB-35
Item Description: Manjila, Damron & Wing (2 Part; 50 scripts per pad)
Revision Date: 8/2017
Print:
Paper:
Size:
Fold:
Finish:
Drill:
Misc Info: Minimum order is 4 pads per physician; maximum order is 20 pads per physician. Quantity must be ordered in increments of 4.

 BAY NEUROSURGERY ASSOCIATES 4175 Euclid Avenue - Suite 9 - Bay City, MI 48706 Phone: 989-667-3410 - Fax: 989-667-3400 Sundt Manjila, MD DEAR #69580088 Deryl G. Damron, PA-C DEAR #69580088 Sheila Wing, PA-C DEAR#69580088	 BAY NEUROSURGERY ASSOCIATES 4175 Euclid Avenue - Suite 9 - Bay City, MI 48706 Phone: 989-667-3410 - Fax: 989-667-3400 Sundt Manjila, MD DEAR #69580088 Deryl G. Damron, PA-C DEAR #69580088 Sheila Wing, PA-C DEAR#69580088
Name _____ Date ____/____/____	Name _____ Date ____/____/____
Address _____	Address _____
(Please Print)	(Please Print)
<input type="checkbox"/> Label	<input type="checkbox"/> Label
MPU _____ TIME3 PER MI	MPU _____ TIME3 PER MI
<small>Autofill based on previously submitted orders. Modified to change, Add and delete in order. Parameters: PLS to change a preference. #</small>	<small>Autofill based on previously submitted orders. Modified to change, Add and delete in order. Parameters: PLS to change a preference. #</small>

Spec Info:

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