

**McLaren Print System Order**

**Order No: 50913**  
**Order Date: 2019-12-10**  
**User: Lisa Ardanowski**  
**Phone: 810-768-2073**

**Ship Location: McLaren Surgery and Endoscopy Center Attn: Lisa Ardanowski**  
**501 S. Ballenger Hwy**  
**Flint, MI 48532**

**Business Card - Name: PAIN MANAGEMENT CLINIC**  
**Quantity: 1000**  
**Paragon Dept No: 30014**  
**Dept Name: Surgery and Endoscopy Center Pain Clinic**  
**Company Number: 60**

**Order Total Price: 52.50**



YOUR NEXT APPOINTMENT IS ON:

MON  TUE  WED  THUR  FRI  
 SAT  SUN

date \_\_\_\_\_

at \_\_\_\_\_ am pm

If you are unable to keep your appointment, please give 24 hours notice.

**Spec Info: Please use previous order's card and remove Dr. Conroy's name from it. Thank you.**