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Order No: 5183 Reprint Previous Order No: 4012
Order Date: 2014-07-25
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Business Card - Name: RUSSELL J. STRUBLE, M.D.
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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.