

McLaren Print System Order

Order No: 44836
Order Date: 2019-04-24
User: Julie Kukla
Phone: 43827

Ship Location: McLaren Bay Region; Marketing Department
503 Mulholland
Bay City, Mi 48708

Forms
Quantity: 20
Paragon Dept No: 60705
Dept Name: Marketing & Business Development
Company Number: 460

Order Total Price: 75.80

Item Number: RXB-16
Item Description: Sherry Levandowski (2 Part; 50 scripts per pad)
Revision Date: 4/2017
Print:
Paper:
Size:
Fold:
Finish:
Drill:
Misc Info: Minimum order is 4 pads per physician; maximum order is 20 pads per physi-
an. Quantity must be ordered in increments of 4.

 2342 W. Campus Drive - Bay City MI 48708 Phone (989) 867-2228 - Fax (989) 874-1070 Sherry Levandowski, M.D. Board Certified in Internal Medicine/Oncology/Hematology MPF F10244500 - DEAN FL3001638 Name: _____ Date: ____/____/____ Address: _____ <input type="checkbox"/> Label MPF# _____ TABLET PMS SR Address (print) _____ <input type="checkbox"/> Label MPF# _____ TABLET PMS SR Address (print) _____	 2342 W. Campus Drive - Bay City MI 48708 Phone (989) 867-2228 - Fax (989) 874-1070 Sherry Levandowski, M.D. Board Certified in Internal Medicine/Oncology/Hematology MPF F10244500 - DEAN FL3001638 Name: _____ Date: ____/____/____ Address: _____ <input type="checkbox"/> Label MPF# _____ TABLET PMS SR Address (print) _____ <input type="checkbox"/> Label MPF# _____ TABLET PMS SR Address (print) _____
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