

**McLaren Print System Order**

**Order No: 54556**  
**Order Date: 2020-06-01**  
**User: Lori Pidick**  
**Phone: 810-989-3320**

**Ship Location: McLaren Port Huron**  
**1221 Pine Grove Avenue**  
**Port Huron, MI 48060**

**Brochures**  
**Quantity: 2**  
**Paragon Dept No: 8086**  
**Dept Name: Materials Management**  
**Company Number: 480**

**Order Total Price: 46.00**

**Item Number: PH Visitor Pass Yellow - Tuesday**  
**Item Description: 12 Up Visitor Pass Labels**  
**Revision Date: 3/2020**  
**Print:**  
**Paper:**  
**Size:**  
**Fold:**  
**Finish:**  
**Drill:**  
**Misc Info: 500 labels (42 sheets)**

|   |   |   |
|---|---|---|
| <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    |
| Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ |
| THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  |
| <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    |
| Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ |
| THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  |
| <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    |
| Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ |
| THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  |
| <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    | <b>VISITORS PASS</b>                    |
| Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ | Name _____<br>Date _____ Room No. _____ |
| THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  | THANKS FOR NOT SMOKING                  |

**Spec Info: Deliver to Receiving Dock**