

McLaren Print System Order

Order No: 57649 Reprint Previous Order No: 5523
 Order Date: 2020-10-15
 User: Chelsey Johnson
 Phone: 517-913-3820

Ship Location: ATTN: Chelsey (Operations Supervisor)
 1540 Lake Lansing Road STE 202
 Lansing, MI 48912

Forms

Quantity: 1000
 Paragon Dept No: 68025
 Dept Name: McLaren Family Medicine & Lipidology
 Company Number: 810

Order Total Price: 0.00

Item Number: MM-17305A
 Item Description: Adult Registration
 Revision Date: 5/2017
 Print: 1 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish:
 Drill: None
 Misc Info:

MCLAREN MEDICAL GROUP ADULT REGISTRATION		Language Preference: English Other specify:																																																								
PATIENT INFORMATION	<table border="1"> <tr> <td>PERSON NAME</td> <td>LAST</td> <td>FIRST</td> <td>MIDDLE</td> <td>INITIAL</td> <td>STREET</td> <td>CITY</td> <td>STATE</td> <td>ZIP CODE</td> </tr> <tr> <td>TELEPHONE</td> <td>HOME</td> <td>WORK</td> <td>CELL</td> <td>FAX</td> <td colspan="4"></td> </tr> <tr> <td>DATE OF BIRTH</td> <td colspan="8"></td> </tr> <tr> <td>SEX</td> <td colspan="8"></td> </tr> <tr> <td>RELIGION</td> <td colspan="8"></td> </tr> </table>	PERSON NAME	LAST	FIRST	MIDDLE	INITIAL	STREET	CITY	STATE	ZIP CODE	TELEPHONE	HOME	WORK	CELL	FAX					DATE OF BIRTH									SEX									RELIGION									<table border="1"> <tr> <td>EMERGENCY CONTACT</td> <td>RELATIONSHIP</td> <td>TELEPHONE</td> </tr> <tr> <td>1</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td></td> <td></td> </tr> </table>			EMERGENCY CONTACT	RELATIONSHIP	TELEPHONE	1			2		
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