

McLaren Print System Order

Order No: 50511
Order Date: 2019-11-21
User: Julie Kukla
Phone: 43827

Ship Location: Mary Covieo, Karmanos Cancer Institute, Bay City
c/o Receiving Dock
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.

 3342 W. Campus Drive - Bay City MI 48708 Phone (989) 867-2728 - Fax (989) 874-1070 Sherry Levandowski, M.D. Board Certified in Internal Medicine/Oncology/Hematology MP# F10044500 - DEAN FL3001638	 3342 W. Campus Drive - Bay City MI 48708 Phone (989) 867-2728 - Fax (989) 874-1070 Sherry Levandowski, M.D. Board Certified in Internal Medicine/Oncology/Hematology MP# F10044500 - DEAN FL3001638
Name: _____ Date: ____/____/____ Address: _____ (Please Print)	Name: _____ Date: ____/____/____ Address: _____ (Please Print)
<input type="checkbox"/> Label MP# _____ TABL Pts. SR Number (max of 4) generally required per line. Additional charges for extra lines and copies of labels required. See the Report/Order form for details. (SR # 101478)	<input type="checkbox"/> Label MP# _____ TABL Pts. SR Number (max of 4) generally required per line. Additional charges for extra lines and copies of labels required. See the Report/Order form for details. (SR # 101478)
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Spec Info: