

McLaren Print System Order

Order No: 78358 Reprint Previous Order No: 5523
 Order Date: 2023-07-17
 User: Casey Coleman
 Phone: 5867925740

Ship Location: **MACOMB WOMENS HEALTH**
 36561 HARPER
 CLINTON TOWNSHIP, MI 48035

Forms

Quantity: 1000
 Paragon Dept No: 72100
 Dept Name: WHA HARPER
 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> <th>PERSON NAME</th> <th>LAST</th> <th>FIRST</th> <th>MIDDLE</th> <th>IF PAID BY OTHER</th> <th>STATUS</th> <th>IF TRANSFERRED</th> <th>IF WOMAN</th> <th>IF TRANSFERRED</th> <th>DATE</th> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	PERSON NAME	LAST	FIRST	MIDDLE	IF PAID BY OTHER	STATUS	IF TRANSFERRED	IF WOMAN	IF TRANSFERRED	DATE	1									<table border="1"> <tr> <th>ADDRESS</th> <th>CITY</th> <th>STATE</th> <th>ZIP CODE</th> </tr> <tr> <td>1</td> <td></td> <td></td> <td></td> </tr> </table>			ADDRESS	CITY	STATE	ZIP CODE	1			
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