

McLaren Print System Order

Order No: 84250
Order Date: 2024-04-03
User: Alicia Stevens
Phone: 810-989-3827

Ship Location: McLaren Port Huron Inpatient Pharmacy Attn: Alicia Stevens
1221 Pine Grove
Port Huron, MI 48060

Forms
Quantity: 5
Paragon Dept No: 26600
Dept Name: Inpatient Pharmacy
Company Number: 480

Order Total Price: 110.00

Item Number: PH-1199
Item Description: High Five Form
Revision Date: 7/2019
Print:
Paper:
Size:
Fold:
Finish:
Drill:
Poster:
Misc Info: 2 pkg; black; 3 part; 8.5x5.5- 100 sets per pkg



High Five Form

Name: _____ Department: _____

Description of recognized behavior: _____

Recognized by: _____ Date: _____

- Forward the original to the recipient.
 - Forward the yellow copy to the recipient's manager.
- be considered for monthly High Five prize drawing, place the pink copy of this form in the drop box located in the cafeteria hallway.

Spec Info:

Thank you for helping others succeed!

