

McLaren Print System Order

Order No: 87315
Order Date: 2024-07-30
User: Jodi LaPlant
Phone: 989-667-3410

Ship Location: WEST SIDE MED MALL ATTN: JODI LAPLANT SUITE 12
4175 N EUCLID AVE SUITE 12
BAY CITY, MI 48706

Brochures
Quantity: 100
Paragon Dept No: 69580
Dept Name: BAY NEUROSCIENCES
Company Number:

Order Total Price: 3.35

Item Number: B-158
Item Description: Fax Cover Sheet - Bay Neurology
Revision Date: 09/2023
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill:
Poster:
Misc Info: SS Black



BAY NEUROLOGY

*Khalil Nasrallah, MD
Jordyn Kippe, PA
Ashley Yotkois, NP-C*

4175 N. EUCLID AVENUE, SUITE 12, BAY CITY, MI 48706

Fax Cover Sheet

Date: _____ Time: _____

To: _____ Fax Number: _____

From: _____

Telephone: **989-667-3410**

Fax: **989-667-3411**

Number of Pages: _____ (including cover sheet)

Remarks: _____

If this facsimile has reached you in error, please contact the above person immediately. Your assistance is appreciated; thank you.

Spec Info:

CONFIDENTIALITY NOTE

This information may have been disclosed to you from records whose confidentiality is protected by federal and state laws. Federal regulations including (42CFR, Parts 160 and 164) and state laws (Public Act 258, Chapter 7, Section 748) prohibit you from making any further disclosure of it without the specific written authorization of the person to whom it pertains or as otherwise permitted by such regulations. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

If the reader of this information is not the intended recipient, you are hereby notified that any use, disclosure, dissemination, distribution, or reproduction of this information is strictly prohibited. If you have received this information in error, please immediately notify us by telephone and return the original to us at the address listed above via the United States Postal Service. Thank you.