

**McLaren Print System Order** 

Order No: 88248 Order Date: 2024-09-18 User: Lisa Barton

Phone:

**Ship Location:** 

Business Card Quantity: 1000 Peoplesoft Dept No: Dept Name: Company Number:

Order Total Price: 52.50

1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
1			
_			

YO	UR NEXT	APPOINT	MENT IS ON	l:	
□ MON	□ TUE	□ WED	□THUR	□ FRI	
		SAT 🗆 S	SUN		
date					
at				. am	pm

Name: MICHAEL MILSHTEYN, M.D.

Title: Orthopaedic Trauma Surgeon & Emp; Fracture Specialist

Title2: Shoulder Surgery & Damp; Arthroplasty Address: 1030 Harrington Blvd., Suite 303

Office:

City: Mount Clemens State: Michigan Zip: 48043 Cell:

Pager:

Phone: (586) 493-3890 Fax: (586) 493-3898

Email: Email2: Dept1: Dept2:

Spec Info: