

**McLaren Print System Order**

**Order No:** 90997  
**Order Date:** 2024-12-19  
**User:** Jennifer Teeling  
**Phone:**

**Ship Location:**

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

**Order Total Price:** 52.50



**PHYSICAL THERAPY**  
Sports Medicine and Fitness Center

CLARKSTON

tel (248) 922-6820  
fax (248) 922-6821

5701 Bow Pointe Drive, Suite 310  
Clarkston, Michigan  
48346

mclaren.org

**YOUR NEXT APPOINTMENT IS ON:**

MON  TUE  WED  THUR  FRI  
 SAT  SUN

**date** \_\_\_\_\_

**at** \_\_\_\_\_ am pm

If you are unable to keep your appointment, please give 24 hours notice.

**Name:** PHYSICAL THERAPY  
**Title:** Sports Medicine and Fitness Center  
**Title2:**  
**Address:** 5701 Bow Pointe Drive, Suite 310  
**Office:**  
**City:** Clarkston  
**State:** Michigan  
**Zip:** 48346  
**Cell:**  
**Pager:**  
**Phone:** (248) 922-6820  
**Fax:** (248) 922-6821  
**Email:**  
**Email2:**  
**Dept1:**  
**Dept2:**

**Spec Info:**