

1372 River Spey Ave. Henderson, NV 89012		INVOICE DATE Order #			
(347) 742-4100 FAX 718-228-7797 Send Orders to: <a href="mailto:supplies@medtrakvng">supplies@medtrakvng</a>	.com or by Fax	_/_/_	1		
Forms on Web: www.medtrakvng.com			1		
Bill To:		Ship	то:		
Name of facility	Address to Ship to:				
Address of Facility					
City/state/zip					
Phone # Check here if <u>same as</u> Ship to_		Phon	e#: ( )		
check here if <b>same as</b> Ship to_		Emai	il address:		
Invoice # Terms Rep.	Ship Date	Via	I	F.O.B.	
1 Credit Card	_/_/_	USPS	Henderson, NV		
Qty Item code	Description	1	Price EA	Amount	
502.0844.0	Irrigator Tips Each bag of 30 pieces		20.00		
1 Freight	USPS		6.45	6.45	
Tax			0.00	0.00	
	SUBT	ΓΟΤΑL		\$	
	TOTAL			<b>\$</b>	
Bill to: Credit Card Type	Credit Car	d #			
	Security Code				
Name on this credit card					
Address for this Card					
I authorize MedTrak VNG, I	nc. to bill my credit o	card in the	amount ab	ove.	
	C:~~ 0	r Easthia	uuthomizoti	on to 718 228	
Card Holders Signa				on to <b>718-228</b> es@medtrakvng	