



PACIFIC MEDICAL, INC.

# Direct Customer Order

P.O. Number:		P.O. Date:	
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Customer Account #	
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Billing And Shipping			
Bill To:	Name:	Ship To:	Name:
Same as ship to?	Address:	Address:	
<input type="checkbox"/>	City:	Zip:	City:
			Zip:

Shipping Method:      Ground                                       Overnight by 10:30 am                                       Saturday Delivery  
 Overnight 8:30 am                                       Overnight Saver End of day                                       3 Day Select

### Vender:



Pacific Medical  
1700 N. Chrisman Rd  
Tracy, CA 95304  
P: (866) 323-8395  
F: (866) 323-8612

Credit Card	
Type	Visa or Mastercard
Card #:	
Expiration:	
Extended Validation:	

Vendor Part Number	Description	Order Qty.	Sub Total
11-0028-9	Protective Knee Guard Universal Size Standard Hinge Neoprene Wraparound Style		\$50.00

Please Note	Grand Sub Total:
<b>Return Policy:</b> 15% restocking fee will apply to all returns (excluding defects) All returned product must be in the original packaging and in resaleable condition  <b>Ship all returns to:</b> Pacific Medical, 1851 E Paradise Rd. Ste B, Tracy CA 95304. RA number must be clearly marked on the outside of the box Defective Product: Pacific Medical will honor Manufacturer Warranties. For ankle products - 3 months, all others 6 months	Tax (pls provide resale cert if applicable)
	Shipping:
	Grand Total:

Internal Order Number	
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