

Billing Information

Customer Name:

Billing Address:

ATTN:


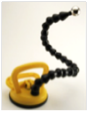

Shipping Information

Facility Name:

Shipping Address:

ATTN:

Phone:

Code	Description	Unit Price	Quantity	Total Price
OC31002	 Calibration Device, Clear Base	\$400.00		
OC31005	 Calibration Device, Suction base, Long Neck	\$400.00		
OC31009	 Calibration Device, Magnetic Base	\$400.00		

Standard Shipping (US only)
Up to 14 business days for delivery

\$15/unit

Priority Shipping (US only)
2-Day delivery

\$35/unit

Next Day Shipping (US only)
Next-day delivery

\$50/unit

For International Orders:

Shipping cost is not included in pricing and will be added to the total cost of the order.

Delivery Duty Unpaid—customs and duties are not included and will be **due upon delivery**.

For Maryland, Pennsylvania, and California Orders:

Sales tax is not included and will be added to the total cost of the order.

TOTAL

PAY BY CHECK:

Please send completed order form and a check to the following address:

Voyant Health, Inc.
5575 Sterrett Place
Suite 250
Columbia MD 21044
Attention: Kathryn Ziegler

PAY BY CREDIT CARD:

Complete the order form and payment information below and fax to **801-881-5239**

Payment Information

Name of Card Holder: _____

Card Type:   

Card Number: _____

Expiration Date: _____ CVC Code: _____

For International Orders:
*Shipping cost is not included in pricing and will be added to the total cost of the order.
Delivery Duty Unpaid—customs and duties are not included and will be **due upon delivery.***

Amount: _____ **For Maryland, Pennsylvania, and California Orders:**
Sales tax is not included and will be added to the total cost of the order.

Signature: _____

Approved by Purchaser

Signature: _____

Name: _____

Title: _____

Date: _____

For any further assistance please contact:

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