METRO GENESEE ORDER FORM

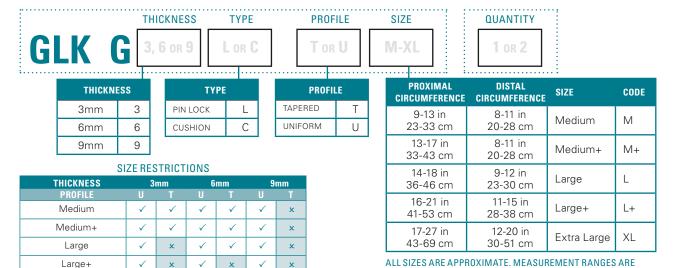


BILLING AND SHIPPING INFO		TO AVOID SHIPPING DELAYS, PLEASE COMPLETE EVERY SECTION				
CUSTOMER#	P.O. #	DATE				
BILLING		SHIPPING (LEAVE BLANK IF SAME AS BILLING)				
FACILITY/ATTN:		FACILITY/ATTN				
ADDRESS		ADDRESS				
CITY	STATE/ZIP	CITY	STATE/ZIP	STATE/ZIP		
PHONE	FAX	PHONE	FAX			
CARRIER* □ UPS □ OTHER		DATE REQUIRED	TIME	□АМ□РМ		
ORDERS SHIP UPS GROUND ON THE FOLLOWING DAY UNLESS SPECIFIED		EMAIL				
PATIENT INFORMAT	ION					
PROSTHETIST (NAME, TITLE)		REQUISITIONER				
PATIENT (FIRST, LAST)						

HOW TO ORDER

Use the charts to insert the codes into the boxes to create the part number. Be sure to check the size restrictions chart to verify your size is available. Each kit contains one Genesee liner, drying stand and literature.

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[✓] AVAILABLE × NOT AVAILABLE

Extra Large

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ADDITIONAL PARTS

PART NUMBER	DESCRIPTION	ΩТΥ	PART NUMBER		QTY
ML SS SM	Metro Liners Sanitizing Spray, 4oz.		4HPH T	4-hole pyramid, with hole, titanium	
ML SS L	Metro Liners Sanitizing Spray, 17oz.		4HPHR T	4-hole pyramid, with hole, rotatable, titanium	
ML SS 5P	Metro Liners Sanitizing Spray, 5-pack, 17oz.		ML DS	Additional Drying Stand	

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ADDITIONAL ITEMS AND NOTES

If ordering additional parts, please indicate Part Number.

EMAIL COMPLETED ORDERS TO: orders@college-park.com

RETURN POLICY

Unopened Metro Liners may be returned within 90 days of purchase. A Return Authorization is required for all returns. Please feel free to contact Customer Service with any questions or concerns. Details and warranty information are available at: www.college-park.com/warranty



RELAXED TO FULLY STRETCHED.