

# HemCon<sup>®</sup> GuardaCare<sup>™</sup> & ChitoGauze<sup>™</sup> Order Form

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|  |                         |   |       |
|--|-------------------------|---|-------|
| <b>Customer Information</b>  |                         |   |       |
| Company  |                         | Contact   |       |
| Order Date   |                         | Position  |       |
| Customer PO #  |                         | Telephone   | Fax   |
| Requested Ship Date  | Requested Delivery Date |   | Email |
| <b>Order Special Requirements:</b><br>Note: Shipping to residential address is additional. <input type="checkbox"/> Check if no signature required for Federal Express delivery. |                         |   |       |
| Bill To Address:   |                         | Ship To Address: <input type="checkbox"/> Same as Bill To <input type="checkbox"/> Residence. |       |
|  |                         |   |       |
|  |                         |   |       |
| Attn:  |                         | Attn / Telephone:   |       |

| Part No.  | Product Description | Quantity | Unit Price  | Extended Price |
|---|---------------------|----------|-------------|----------------|
| <b>HemCon GuardaCare, 2 x 2 inch (5 x 5 cm), 8ply</b>   |                     |          |             |                |
| 135   | Box of 10           |          | \$ 99.00    | \$             |
| 135   | Case of 100         |          | \$ 999.00   | \$             |
| <b>HemCon GuardaCare, 4 x 4 inch (10 x 10 cm), 8ply</b> |                     |          |             |                |
| 136   | Box of 10           |          | \$ 200.00   | \$             |
| 136   | Case of 100         |          | \$ 2,000.00 | \$             |
| <b>HemCon ChitoGauze, 4 in x 4 yds (10 cm x 3.7 m)</b>  |                     |          |             |                |
| 130   | Box of 5            |          | \$ 173.75   | \$             |
| 130   | Case of 100         |          | \$ 3,475.00 | \$             |

|  |                                     |   |   |                           |    |
|--|-------------------------------------|---|---|---------------------------|----|
| <b>Payment Options:</b>  |                                     | <input type="checkbox"/> Credit Card      | <input type="checkbox"/> Net 30 Terms if approved |                           |    |
| <input type="checkbox"/> Visa  | <input type="checkbox"/> MasterCard | <input type="checkbox"/> American Express | <input type="checkbox"/> Discover                 |                           |    |
| Account #:   | Expiration Date:                    | Verification #:                           |   |                           |    |
| Name on Card:  | Card Billing Street #:              | Card Billing Zip:                         |   |                           |    |
| <b>Shipping &amp; Handling</b> (3 Day to AK is NA) Ship price is to business address (residential is additional).<br><i>Please circle the requested ship method below and enter the shipping total amount.</i> |                                     |   |   |                           |    |
| FedEx Ground   |                                     | Customer Account:# _____                  |   |                           |    |
| <b>Quantity</b>  | <b>3 Day</b>                        | <b>2 Day</b>                              | <b>Standard Overnight</b>                         | <b>Priority Overnight</b> | \$ |
| 1 to 20 Bandages   | \$ 15                               | \$ 20                                     | \$ 35   | \$ 40                     |    |
| 21 to 100 Bandages   | \$ 20                               | \$ 25                                     | \$ 45   | \$ 50                     |    |
| <input type="checkbox"/> Check if residential address; shipping is \$5.00 additional.  |                                     |   | <b>Order Total (includes shipping): \$</b>        |                           |    |

Please fax orders to +1.971.223.1000 or email to: [sales@hemcon.com](mailto:sales@hemcon.com)  
 Customer Service: +1.503.245.0459 ext 300

