 **Barton Button Order Form**

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| **Date:****Purchase Order Number:****Name:****Organization****Phone: Fax:****Email:** | **WAYS TO ORDER**:Medical Innovations International6256 34th Ave NWRochester, MN 55901 USAFax: 507-281-9096Phone: 507-289-0761Email: Info@medicalinnovations.com |

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| **Billing Address:****Address:****City****State****Zip Country** | **Shipping Address (if different from Billing):****Address:****City****State****Zip Country** |

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| --- | --- | --- | --- | --- |
| Part Number | Description | Price | Quantity | Extended Price |
| ENBMB091 | 9 Short | $106.00 |  |  |
| ENBMB092 | 9 Regular | $106.00 |  |  |
| ENBMB093 | 9 Long | $106.00 |  |  |
| ENBMB101 | 10 Short | $106.00 |  |  |
| ENBMB102 | 10 Regular | $106.00 |  |  |
| ENBMB103 | 10 Long | $106.00 |  |  |
| ENBMB121 | 12 Short | $106.00 |  |  |
| ENBMB122 | 12 Regular | $106.00 |  |  |
| ENBMB123 | 12 Long | $106.00 |  |  |
| ENBMB141 | 14 Short | $106.00 |  |  |
| ENBMB142 | 14 Regular | $106.00 |  |  |
| ENBMB143 | 14 Long | $106.00 |  |  |
| ENBMBKIT | Large Sizing Kit | $159.00 |  |  |
| ENBMBKIT4 | Small Sizing Kit | $53.00 |  |  |
|  | Total Order |  |  |
|  | Shipping\* See Below |  |  |

**Payment Options:**

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| **€** | **Check Enclosed,** drawn on a US Account in USD dollars, Check # \_\_\_\_\_\_\_**If the bank routing number on the check does not have 9(nine) digits, there is an additional $25 check cashing fee (bank charge).** |
| **€** | **Wire Transfer** (Email for Instructions) [usually for international orders] |
| **€** | **Credit Card #** **Card Billing Zip Code:** **Name on Credit Card:** **Expiration Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Signature:**  |