



IMI ORDER FORM

International Medical Industries, Inc.

2881 West McNab Road, Pompano Beach, FL USA 33069

Phone Order 800-344-2554 Fax Order 954-917-9244

Billing Information	Shipping Information <i>(If Different)</i>
Name: _____	Name: _____
Company Name: _____	Company Name: _____
Address: _____ _____	Address: _____ _____
City: _____	City: _____
State: _____	State: _____
Zip Code: _____	Zip Code: _____
Telephone: _____	Telephone: _____
Facsimile: _____	Facsimile: _____
Email: _____	Email: _____

	Product Code	Product Name	Quantity	Price
1.				
2.				
3.				
4.				
Total				

Customer #: _____

Purchase Order #: _____

or

Credit Card: _____ **Name On Card:** _____

Credit Card #: _____ **Exp. Date:** _____

Signature: _____

We Will Contact You ASAP Regarding Shipping Charges.

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