

Ordered by: \_\_\_\_\_ Phone # ( \_\_\_\_\_ ) \_\_\_\_\_

BILLING: P.O. Number \_\_\_\_\_ Townsend Account # \_\_\_\_\_

Bill To: \_\_\_\_\_

Ship To: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_

Shipping Preference:  Ground  2-Day P.M.  2-Day A.M.  Next Day P.M.  Next Day A.M.

*(If no preference is indicated, this order will be shipped 2 Day P.M.) Note: We do not ship products directly to patients.*

**Patient's Last Name:** \_\_\_\_\_

**Patient's First Name:** \_\_\_\_\_

**ABDUCTION PILLOW IS SET AT 30°**

**Elite Shoulder Sling...**

- Breathable Mesh Material
- Dual Reinforced Elbow Section

S/M Quantity Part # 54-003 \_\_\_\_\_

L/XL Quantity Part # 54-004 \_\_\_\_\_

**Townsend Shoulder Sling...**

- Brush Material

S/M Quantity Part # 54-001 \_\_\_\_\_

L/XL Quantity Part # 54-002 \_\_\_\_\_

*Please complete and fax this form to 800.798.2722 (24-hours a day). If you are calling in your order, this form indicates the options and information that will be required by our staff. For phone orders, please call 800.700.2722 between 6:00 a.m. and 4:00 p.m. (PST).*