



RX Products
You Know and Trust

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TAMPER RESISTANT SHEETS TO USE WITH EHR/EMR "BLANK" 8½" X 11" RX PAPER

TAMPER RESISTANT SCRIPTS

TAMPER RESISTANT SCRIPTS

Name on Credit Card _____

Ship to:

Address _____ Suite _____

City _____ State _____ Zip _____

Tel (_____) _____ Fax (_____) _____

Contact _____

Email Address _____

*** Please **CHECK** the amount you want to order ***

PLEASE CHECK THE AMOUNT YOU WANT TO ORDER

8 1/2 x 11 BLANK Tamper Resistant EMR Paper to be Used with Your Printer

# of Sheets	<input type="checkbox"/> 1,000	<input type="checkbox"/> 2,000	<input type="checkbox"/> 5,000	<input type="checkbox"/> 10,000	<input type="checkbox"/> 20,000
	\$130.00	\$228.00	\$415.00	\$699.00	1199.00
S/H	28.75	41.75	98.75	197.75	345.75
Total	\$158.75	\$ 269.75	\$513.75	\$896.75	\$1544.75

If you are a new client, for security reasons, please fax a current copy of your DEA or Medical License with your EMR order form.

☐ DISC ☐ AMEX

SECURITY CODE _____

☐ VISA ☐ M/C NUMBER _____ EXPIRY DATE _____

* Address verification system for credit. If you are paying by credit card, you **MUST** put the address where the credit card statement is sent when you receive your bill.

Address _____ Zip _____

Print Cardholder's Name _____

Cardholder's Signature _____ Title _____ Date _____

If mailing a CHECK for payment, please make check payable to: **Minuteman Press**
Shipped Within 2-3 Days From Receipt Of Order & Payment.

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