






HALO Medical Technologies  
 2436 Emrick Boulevard  
 Bethlehem, PA 18020  
 Toll-Free: 877-686-8149  
 email: orders@halomedtech.com  
 www.HaloMedTech.com

**DISPOSABLE SUPPLIES ORDER FORM**

*Please complete this form and e-mail it to HALO. You will receive a confirmation by e-mail.*

<b>PO #</b>	
<b>Bill To:</b>	<b>Ship To:</b> <input type="checkbox"/> Same as "Bill To" Information
Name	Name
Company	Company
Address	Address
City ST Zip	City ST Zip
Phone	Phone
E-mail	E-mail

Part No.	Item	Description	QTY P/PACK	Unit Price	QTY	Amount
HMT-EPC		Endoanal or Endovaginal Probe Covers Latex-Free, Nonsterile, Nonlubricated	20 Each	\$65.00		
HMT-SPC		Viral Barrier Surface Probe Covers - Latex-Free, Nonsterile, Nonlubricated	20 Each	\$65.00		
HMT-RSK		Rectal Scanning Kit, containing non-sterile, Latex Free 2x30cm transrectal ultrasound probe cover (1) bands, and extension tubing	10 Kits	\$ 140.00		
Product Total * (not including shipping)						

Need By

**TERMS & CONDITIONS:** Claims arising from invoices/product receipt must be made within 7 working days. A \$50 minimum or 10% restocking fee will apply for all returns not the fault of Halo Medical Technologies.

**SHIPPING INFORMATION:** Specific shipping costs will be calculated and added to the final invoice and credit card charges. Unless otherwise specified, HALO uses FedEx Ground or USPS services.

HMT- AOF February 2024

**Payment Method:**

<input type="radio"/> CREDIT CARD	<input type="radio"/> VISA	<input type="radio"/> MASTERCARD	<input type="radio"/> DISCOVER
NAME ON CARD			
CARD #			
Exp Date (MM/YR)		SEC CODE	
<input type="radio"/> CHECK	Must have approved credit application on file. <b>MAKE CHECKS PAYABLE TO HALO MEDICAL TECHNOLOGIES</b>		
<input type="radio"/> INVOICE	<b>Please issue PO #</b> - All invoices are due within 30 days of invoice date.		