

Product Usage - Purchase Order Request

Induce Biologics USA Inc. | 15 Cushing | Irvine, CA | 888-864-4906 | www.InduceBiologics.com

Check here if reporting Product Usage and Rep Designation ONLY			Today's Date:		
Distributor Rep:			Purchase Order #		
Surgery Date:					
Surgeon:			BILL TO:		
Facility:			Facility:		
Procedure:			Contact:		
Comments/Additional Information	tion:		Email:		
			Phone:		
			Comments:		
Product Code	Product Description	Size	Serial Number	Fees	Only Check 1 box
Product Sticke	r May be A	pplied	Here		Replenish Bill only
Product Sticke	r May be A	pplied	Here		Replenish Bill only
Product Sticke	r May be A	pplied	Here		Replenish Bill only
Product Sticke	r May be A	pplied	Here		Replenish Bill only
PO Authorized BY: Signature & Tit	tle		1	Total	

Send completed form to: CustomerService@InduceBiologics.com - or - fax (888) 864-6707