Snyder HemBand

LIGATOR ORDER FORM

Please send completed form by fax or email to: (800) 886-9615 or orders@hemband.com

If you have questions regarding your order, please call (800) 242-6145

Order Date: _____   PO # (optional): _____

Company Name		**Phone Number**	
Ordering Physician		**Physician NPI**	
Order Contact Name		**Email**	
Billing Address			
Shipping Address			

Item(s) Ordered:

Ref No	Item	Quantity	Price / Unit	Total Amount
DS905727	Snyder HemBand™ – Disposable hemorrhoidal ligator with integrated obturator 1 individual package Includes 3 latex bands. Latex-free bands available upon request.	_____	**$35.00** per unit	$ _____

*Prices are inclusive of all taxes. Prices valid in the U.S. only.

Select Delivery Options* (Please check only one):

☐ FedEx Standard Overnight (Next business day by 3PM) – FREE OF CHARGE

☐ FedEx Priority Overnight (Next business day by 10-12AM) – $40.00

☐ FedEx First Overnight (Next business day by 8AM) – $150.00

*Priority and First Overnight shipping rates apply to a box of 20 units. Some FedEx services are not available in all areas. Please note that all orders placed after 2pm ET will be processed next business day. No Saturday or Sunday delivery.

Select Payment Method (please select only one)
☐ Electronic Check/ACH (Attach a copy of a voided check)
Bank Name: _____ Account# _____ Routing# _____
☐ Credit/Debit Card (If you do not wish to use this form to enter a card number, we can email you an online payment link.)
Name on Card: _____ Card# _____ Exp: _____/_____ CVV: _____
☐ Invoice (Subject to credit approval and payment terms of Wilbur Hill LLC)

By signing below, buyer has read, understands, and agrees to the Wilbur Hill LLC Terms and Conditions of Sale. Any overdue payments shall bear interest at a rate equal to the lesser of: (i) 1.5% per month, or (ii) the maximum amount permitted by law, assessed from the date payment was initially due.

Print Name: _____   Sign: _____