

# MEDICAL EXAMINATION REPORT ORDER FORM

## UTAH TRUCKING ASSOCIATION

3060 W. CALIFORNIA AVE. STE A  
SALT LAKE CITY, UTAH 84104-4612  
(801) 973-9370 FAX (801) 973-8515

DESCRIPTION	PRICE	QTY	TOTAL
DOT MEDICAL CARDS (25)      [.36]	\$ 9.00		
DOT MEDICAL CARDS (50)      [.26]	\$ 13.00		
DOT MEDICAL CARDS (100)    [.20]	\$ 20.00		
PHYSICAL EXAM FORM/NCR (25) [.50]	\$ 12.00		
PHYSICAL EXAM FORM/NCR (50) [.40]	\$ 20.00		
PHYSICAL EXAM FORM/NCR (100) [.35]	\$ 35.00		

<b>** SHIPPING</b>	
25 FORMS & CARDS	\$ 4.00
50 FORMS & CARDS	\$ 5.00
100 FORMS & CARDS	\$ 8.00
100+ FORMS & CARDS	\$ 9.50

SUB-TOTAL	
7.05% Sales Tax Rate	
** SHIPPING	
<b>GRAND TOTAL</b>	

**PLEASE MAKE CHECK PAYABLE TO:** UTAH TRUCKING ASSOCIATION  
3060 W. CALIFORNIA AVE. STE A  
SALT LAKE CITY UT 84104

COMPANY NAME \_\_\_\_\_

ATTENTION \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

**CREDIT CARD INFORMATION**     Visa     MC     AMEX

Number \_\_\_\_\_

Expires \_\_\_\_ / \_\_\_\_ / \_\_\_\_    Customer Code \_\_\_\_\_

Authorized by \_\_\_\_\_

**PAYMENT REQUIRED WITH ORDER**