

Employee Signature:

Date:_

Cleveland Clinic Order Form

Employee Name: Manager/Supervisor: Hospital Location:		Delivery Location:Phone Number:		
Please specify the sizes, quantities, and color of the desired garments below.				
Style #	Garment	Qty	Size	Color
02A1	Women's V-Neck Tunics			
4567	Women's Snap-Front V-Neck Scrub Top			
7209	Scrub Zone Unisex Scrub Top			
05S6	Women's Modern Tunics			
4576	Scrub Zone Women's Warm Up Jacket			
45S2	Women's Modern Crewnecks			
4575	Classic Women's Warm Up Jacket			
11SG	Landau Proflex Women's Cargo Pants			
1057	Women's Tapered-Leg Scrub Pants			
10SE	Landau Classic Women's Relaxed Fit Scrub Pants			
11A6	Landau Classic Women's Dual Pocket Cargo Pant			
7253	Classic Women's Landau® Flare Leg Scrub Pant			
7210	Scrub Zone Women's Cargo Pant			
02S3	Men's V-Neck			
02A9	Unisex ScrubTop			
02SH	Landau Classic Men's 5 Pocket Scrub Top			
4553	Classic Men's Snap Front Warm-Up Jacket			
4587	Warmup Jackets			
10A1	Classic Unisex Scrub Pant			
10D1	Men's Cargo Pant			
7211	Scrub Zone Unisex Drawcord Scrub Pant			
12SK	Landau Proflex Elastic Cargo Pants			
PLEASE DOUBLE CHECK YOUR NAME AS IT WILL BE ENTERED AS YOU FILL IN				
Embroide	ery	Qty	Price	Total
Logo				
Name				3
			Total	