

INVOICE/ORDER FORM

Meyers Neuropsychological Services

The Future of Neuropsychology

11727 Graces Way
 Clermont, FL 34711
 Phone 712 251 7545
 jmeyersneuro@yahoo.com

INVOICE # _____

DATE: _____

PURCHASING ORGANIZATION

SHIP TO

VENDOR CODE	PO#	SHIPPING METHOD	PAYMENT TERMS	DUE DATE
		Email	Due on receipt	Due on receipt

ITEM	QUANTITY#	DESCRIPTION	UNIT PRICE	LINE TOTAL
1		MNB Site License Initial Purchase	550.00	
2		MNB Individual User License Initial Purchase	300.00	
3		MNB New User Kit	45.00	
4		MNB Yearly Renewal of Site License	500.00	
5		MNB Yearly Renewal of Single User License	150.00	
6		DASHBOARD! Initial License	350.00	
7		DASHBOARD! Yearly Renewal	150.00	
8		Category Test (Full, Victoria, Child, Intermediate, & Aeromedical) each version. Underline version(s) ordered.	125.00	
TOTAL				

To pay by check: Send check to Meyers Neuropsychological Services at the address above.

To pay by credit card:

Name on Credit Card: _____ Expiration Date: _____

Credit Card # _____ Security Code: _____

Zip Code: _____ Phone Number: _____ Email: _____

I authorize Meyers Neuropsychological Services to charge my credit card for the total amount.

Signed: _____ Date: _____

THANK YOU FOR YOUR BUSINESS!