

Purchase Order

Beth Israel Deaconess Med Ctr

330 BROOKLINE AVENUE
BOSTON MA 02215
United States

Supplier: 0000062526
ALPHA MODALITIES LLC
1111 S 344TH ST, STE 205
FEDERAL WAY VA 98003

FAX 206-374-2476
BUSN 206-948-0555
Vendor Email: suzannehanson@alphamodalities.com

Dispatch via E-Mail

Purchase Order 1180001139	Date 10/04/2017	Revision	Page 1
Payment Terms NET 30	Freight Terms STANDARD	Ship Via DESTINATIO N	
Buyer Darla Eden	Phone 617/667-1464	Currency USD	
Buyer Email deden@caregroup.org		Fax 617/667-1461	

Ship To: BIDMC WEST CAMPUS
471 BROOKLINE AVENUE
BOSTON MA 02215
United States

Attention: Jacki Chechile

Bill To: Beth Israel Deaconess Medical Center
Accounts Payable
P.O. Box 15704
Boston MA 02215-0014
United States

Tax Exempt? Y **Tax Exempt ID:** 042-103881

Replenishment Option: Standard

Line-Sch	Item/Description	Mfg ID	Quantity	UOM	PO Price	Extended Amt	Due Date
1- 1	A-SEATSWHSL-L Large Seated Sling - Wipeable		2.00	EA	439.00	878.00	10/04/2017
Schedule Total						<u>878.00</u>	
Item Total						<u>878.00</u>	
2- 1	A-SEATSWHSL-X Extra large seated sling - wipeable		2.00	EA	439.00	878.00	10/04/2017
Schedule Total						<u>878.00</u>	
Item Total						<u>878.00</u>	
3- 1	SLINGBAGS Sling Bags		4.00	EA	49.00	196.00	10/04/2017
Schedule Total						<u>196.00</u>	
Item Total						<u>196.00</u>	

Per Quote# 090817-04 dated 09/08/17; FREIGHT TERMS: UPS GROUND FREIGHT COLLECT ACCT# 37YV29

Total PO Amount 1,952.00

PLEASE PRINT PURCHASE ORDER NUMBER AND ATTENTION LINE CLEARLY ON THE LABELS OF ALL PACKAGES

PLEASE CONFIRM PRICE AND DELIVERY DATE WITH BUYER VIA EMAIL OR FAX (SEE CONTACT INFO ABOVE)

Authorized Signature